ASSESSMENT OF SERVICE MEMBERS KNOWLEDGE AND TRUST
OF THE DEPARTMENT OF VETERANS AFFAIRS

A thesis presented to the Faculty of the U.S. Army
Command and General Staff College in partial
fulfillment of the requirements for the
degree

MASTER OF MILITARY ART AND SCIENCE
General Studies

by

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2015

REPORT DOCUMENTATION PAGE		*Form Approved* *OMB No. 0704-0188*
Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing this collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports (0704-0188), 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. **PLEASE DO NOT RETURN YOUR FORM TO THE ABOVE ADDRESS.**		

1. REPORT DATE *(DD-MM-YYYY)* 12-06-2015	2. REPORT TYPE Master's Thesis	3. DATES COVERED *(From - To)* AUG 2014 – JUNE 2015
4. TITLE AND SUBTITLE Assessment of Service Members Knowledge and Trust of the Department of Veterans Affairs		**5a. CONTRACT NUMBER**
		5b. GRANT NUMBER
		5c. PROGRAM ELEMENT NUMBER
6. AUTHOR(S) Amanda M. Cournoyer		**5d. PROJECT NUMBER**
		5e. TASK NUMBER
		5f. WORK UNIT NUMBER
7. PERFORMING ORGANIZATION NAME(S) AND ADDRESS(ES) U.S. Army Command and General Staff College ATTN: ATZL-SWD-GD Fort Leavenworth, KS 66027-2301		**8. PERFORMING ORG REPORT NUMBER**
9. SPONSORING / MONITORING AGENCY NAME(S) AND ADDRESS(ES)		**10. SPONSOR/MONITOR'S ACRONYM(S)**
		11. SPONSOR/MONITOR'S REPORT NUMBER(S)

12. DISTRIBUTION / AVAILABILITY STATEMENT
Approved for Public Release; Distribution is Unlimited
13. SUPPLEMENTARY NOTES
14. ABSTRACT

The Department of Veterans Affairs (VA) mission is to fulfill our nation's enduring commitment to Veterans. The VA recently faced crises and is currently undergoing a transformation. As a result, one of VA's top priorities is regaining the trust of the Nation's Veterans, Service Members, and the public. This research was designed to assess whether Service Member knowledge of VA and joint VA and Department of Defense (DoD) programs and perception of VA as a trusted organization affect potential use of VA program.

15. SUBJECT TERMS
Department of Veterans Affairs, Service Members, Trust, Knowledge, Benefits, Media Effects

16. SECURITY CLASSIFICATION OF:			17. LIMITATION OF ABSTRACT	18. NUMBER OF PAGES	19a. NAME OF RESPONSIBLE PERSON
a. REPORT (U)	b. ABSTRACT (U)	c. THIS PAGE (U)	(U)	93	19b. PHONE NUMBER *(include area code)*

Standard Form 298 (Rev. 8-98)
Prescribed by ANSI Std. Z39.18

MASTER OF MILITARY ART AND SCIENCE
THESIS APPROVAL PAGE

Name of Candidate: Amanda M. Cournoyer

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The opinions and conclusions expressed herein are those of the student author and do not necessarily represent the views of the U.S. Army Command and General Staff College or any other governmental agency. (References to this study should include the foregoing statement.)

ABSTRACT

ASSESSMENT OF SERVICE MEMBERS KNOWLEDGE AND TRUST OF THE
DEPARTMENT OF VETERANS AFFAIRS, by Amanda M. Cournoyer, 93 pages.

The Department of Veterans Affairs (VA) mission is to fulfill our nation's enduring
commitment to Veterans. The VA recently faced crises and is currently undergoing a
transformation. As a result, one of VA's top priorities is regaining the trust of the
Nation's Veterans, Service Members, and the public. This research was designed to
assess whether Service Member knowledge of VA and joint VA and Department of
Defense (DoD) programs and perception of VA as a trusted organization affect potential
use of VA program.

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ACRONYMS

CGSC	Command and General Staff College
DoD	Department of Defense
NCA	National Cemetery Administration
OEF	Operation Enduring Freedom
OIF	Operation Iraqi Freedom
VA	Department of Veterans Affairs
VA OIG	Department of Veterans Affairs Office of Inspector General
VBA	Veterans Benefits Administration
VHA	Veterans Health Administration

ILLUSTRATIONS

CHAPTER 1

INTRODUCTION

Background

You've have risked your lives on multiple tours to defend our nation. And as a
country, we have a sacred obligation to serve you as well as you've served us–an
obligation that doesn't end with your tour of duty. . . . In the years to come, many
from this generation will step out of uniform, and their legacy will be secure. But
whether or not this country properly repays their heroism, properly repays their
patriotism, their service and their sacrifice, that's in our hands.[1]
— President Barack Obama, *Remarks at the Signing of the*
Veterans Access, Choice and Accountability Act

We have strong institutional values to guide us—Integrity, Commitment,
Advocacy, Respect, and Excellence. We will all need to live by those values as
we rise to meet the challenges ahead. . . . This is about restoring the trust of
Veterans, of our elected representatives, and all Americans.[2]
— Secretary of VA Robert McDonald,
Video Message to VA Employees

The Department of Veterans Affairs (VA) mission is to fulfill our nation's

enduring commitment to Veterans. In recent years, VA has faced criticism regarding

whether it can accomplish its mission after dealing with the recent crises: disability

claims backlog (2013); and delays in healthcare appointment scheduling (2014). These

systematic problems resulted in the confirmation of Robert McDonald as the new

.Secretary of VA on July 29, 2014. Secretary McDonald's mission, as directed by

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[1] President Barrack Obama, *Remarks at the Signing of the Veterans Access,
Choice and Accountability Act* (Washington, DC: The White House, August 7, 2014).

[2] Robert McDonald, VA Secretary, Video Message to VA Employees,
Washington, DC, July 31, 2014.

President Obama, is to tackle the internal problems within VA while reaffirming the

Agencies worth and regain Veterans' trust.[3]

<div align="center">History of VA</div>

Department of Veterans Affairs is one of the oldest organizations in the United

States. VA's roots date back to the colonial period in 1636 when Plymouth enacted a law

to provide pensions to Veterans disabled while defending the colony from Indians.

Pension payments remained the responsibility of the states until 1789 after the U.S

Constitution ratified and Congress made the expense a line item in the federal budget. In

1833, Congress established the Bureau of Pensions to manage the disbursements and was

the first agency with a sole mission of serving Veterans. The Bureau of Pensions served a

population of 80,000 Veterans.

At the end of the Civil War, the Veteran population increased to over two million,

not including Confederate Soldiers. In 1865 during President Lincoln's second inaugural

address, he called for Congress "to care for him who shall have borne the battle and for

his widow, and his orphan." This quote set the precedent of Veterans' needs as a national

priority and is currently VA's motto. Now with Presidential accountability and oversight,

Congress now charged with passing several Acts, which implemented benefits for

Veterans and their dependents, to include medical care, nursing homes and an expansion

of the existing pension program.

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[3] U.S. Department of Veterans Affairs, "Secretary Robert McDonald's Remarks at the American Legion 96th Annual Convention Charlotte, NC," August 26, 2014, accessed October 11, 2014, http://www.va.gov/opa/pressrel/pressrelease.cfm?id=2613.

With every war since the Civil War the United States engaged in the Veteran population expanded, the necessity for benefits increased, and VA grew as an organization. After World War I, the Veteran population rose by 4.7 million. As a result, Congress passed acts to provide life insurance and vocational rehabilitation to Veterans as well as expansion of the medical care programs. In 1930, President Hoover signed an executive order consolidating all the responsible bureaus providing services to Veterans under one organization, the Veterans Administration.

After World War II, the Veteran population grew by another 15 million. In order to accommodate this capacity the Veterans Administration grew exponentially. A resulting benefit to this Veteran population returning from World War II was the implementation of the G.I. Bill of Rights, which provides education benefits, home loan guarantees and unemployment compensation. This Bill provided opportunities for war Veterans and significantly shaped the nation's economy in the post-war years.

By the time the Korean Conflict occurred, the Veteran Administration expanded from approximately 100 facilities and 55,000 employees to nearly 550 facilities and 164,000 employees. At this time, the Veteran Administration was providing medical and dental services to 2.5 million Veterans each year and paying $125 million per month in pensions and disability compensation to Veterans and-or their dependents. The Vietnam War brought about another six million Veterans and new set of needs. Many of the programs established for the previous wars received modifications for this population and new additions to the portfolio of services. This included outreach programs, the transfer of Army cemeteries to the Veterans Administration and providing medical care and disability payments for those exposed to Agent Orange (an herbicide used to defoliate

trees and expose enemy positions) and suffering from consequential health concerns added to VA's list of benefits. A few years after the war, another necessity became apparent for wartime Veterans, mental health counseling for post-traumatic stress disorder, drug and alcohol dependence. In response, VetCenters established as confidential community treatment centers and began providing free behavioral health and substance abuse counseling.

By 1989, a third of the United States population was eligible for Veterans' benefits and President Reagan signed legislation that elevated the Veterans Administration to cabinet status creating the VA, the second largest Cabinet following the Department of Defense (DoD). This new status included a reorganization into the three administrations: Veterans Health Administration (VHA), Veterans Benefits Administration (VBA) and National Cemetery Administration (NCA).

The Persian Gulf War brought another 700,000 new war Veterans and was the first conflict VA faced in its new organization. Just like previous wars, this resulted in revisions to existing programs and new concerns for Veterans' needs. In particular, the addition of unexplainable chronic symptoms labeled as undiagnosed Gulf War illnesses. Following Desert Storm VA reformed many of its healthcare and benefit programs to adjust to the changing demographics of the nation's Veterans, in particular aging Veterans and women's populations were a growing concern. In addition, changes were necessary due to technological advancements and the need to update outdated systems across the Department.[4]

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[4] U.S. Department of Veterans Affairs, *VA History in Brief* (Washington, DC: Department of Veterans Affairs, 2006).

Following the September 11, 2001 terrorist attacks on the U.S., Operation

Enduring Freedom (OEF) and Operation Iraqi Freedom (OIF) brought another 2,794,947[5]

million Veterans serving in Afghanistan and Iraq into VA. This group of Veterans

brought about the particular challenge of how to reach them as their generation grew up

in an era of accessing information using modern technology. Therefore, VA implemented

specific OEF—OIF outreach programs and new positions to coordinate transition

services for all active duty, reservist and national guardsmen. Additionally, VA

implemented new technological tools geared at this population but open to all Veterans.

VHA implemented a program called MyHealth*e*Vet, which is an online account for

Veterans to log in and apply for healthcare, access their medical records, refill

prescriptions, secure message with their VA physicians and many other features. VBA

also implemented a similar program in coordination with DoD called eBenefits which

allows Veterans, Service Members and their families to create online accounts and have

direct access to benefit applications, claim statuses and educational tools regarding VA

benefits and eligibility. These types of programs have provided the needed instant and

real-time online access for a generation of Veterans who grew up in the technological era.

Today's VA serves a projected Veteran population of 22 million, has nearly nine

million Veterans enrolled in the health care system, pays disability or pension benefits to

over five million Veterans or dependents and two million Veterans currently receive

education or vocational rehabilitation assistance. VA's employee workforce has

expanded to almost 350,000 personnel employed at more than 1400 sites to include

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[5] U.S. Department of Veterans Affairs, "Veteran Population Projection Model 2014," last updated November 7, 2014, accessed March 16, 2015, http://www.va.gov/vetdata/Veteran_Population.asp.

hospitals, clinics, benefit offices and cemeteries and had a $153.9 billion budget in fiscal year 2014.[6]

<u>VA Faces Crises and Calls for New Leadership</u>

In March of 2013, VA gained national attention when the disability claims backlog grew to an all-time high reaching 611,000 pending claims waiting for over 125 days, with nearly 900,000 total claims in inventory. VA claims there were numerous factors led to the growing backlog, to include the increase in awareness of benefits leading to higher claim submissions, legislative changes granting additional benefits to Vietnam Veterans, the current military conflict and the economic decline.[7]

In February of 2014, VA again gained national attention when an employee alleged forty Veterans died while waiting to receive medical treatment at a VA hospital in Phoenix, Arizona. Immediately following this accusation, VA Office of Inspector General (VA OIG) started an audit to review these allegations. VA OIG reviewed patient wait times, scheduling practices and the alleged patient deaths and released their final report in August of 2014.[8] The report confirmed barriers which patients experienced adversely effected the quality of care they received. VA OIG was unable to confirm these barriers were a direct cause of the patients' deaths.

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[6] Ibid.

[7] U.S. Department of Veterans Affairs, *Strategic Plan to Eliminate the Compensation Claims Backlog* (Washington, DC: Veterans Benefits Administration, 2013).

[8] U.S. Department of Veterans Affairs, *Department of Veterans Affairs FY 2014-2020 Strategic Plan* (Washington, DC: Department of Veterans Affairs, 2013).

These crises led to the resignation of Secretary Eric Shinseki and the subsequent appointment of Robert McDonald as the new Secretary. Secretary McDonald accepted the challenge of not only resolving the aftermath of these crises, but to also focus on VA's actions moving forward. Secretary McDonald outlined an initiative shortly after his appointment, which supported VA's mission and set short-term objectives:

Rebuild trust with Veterans and stakeholders;

Improve service delivery, focusing on Veterans outcomes;

Set a course for long-term excellence and reform.[9]

The first short term objective, rebuilding trust with Veterans and stakeholders, is a critical piece needed in order to succeed in the following two short term objectives. In order to meet this objective, you must ask what will rebuild trust with Veterans and stakeholders and how do you know when you have accomplished the objective?

<u>The need to assess the Service
Member Community</u>

An important segment of the United States' population to VA is the Service Member community: those individuals currently serving in the Active Component or Reserve Component of the United States Armed Forces. Service Members eligible for select VA benefits while still serving. When they transition out of military service, their eligibility increases based on their length and characterization of service. Therefore, VA works closely with DoD to provide a bridge and ease the transition for Service Members into Veteran status and onto VA benefits. VA's Strategic Plan for fiscal year 2014 to

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[9] U.S. Department of Veterans Affairs, *The Road to Veterans Day 2014* (Washington, DC: Department of Veterans Affairs, 2014).

2020 identified three strategic goals, each nested with specific objectives as seen in

figure 1.[10]
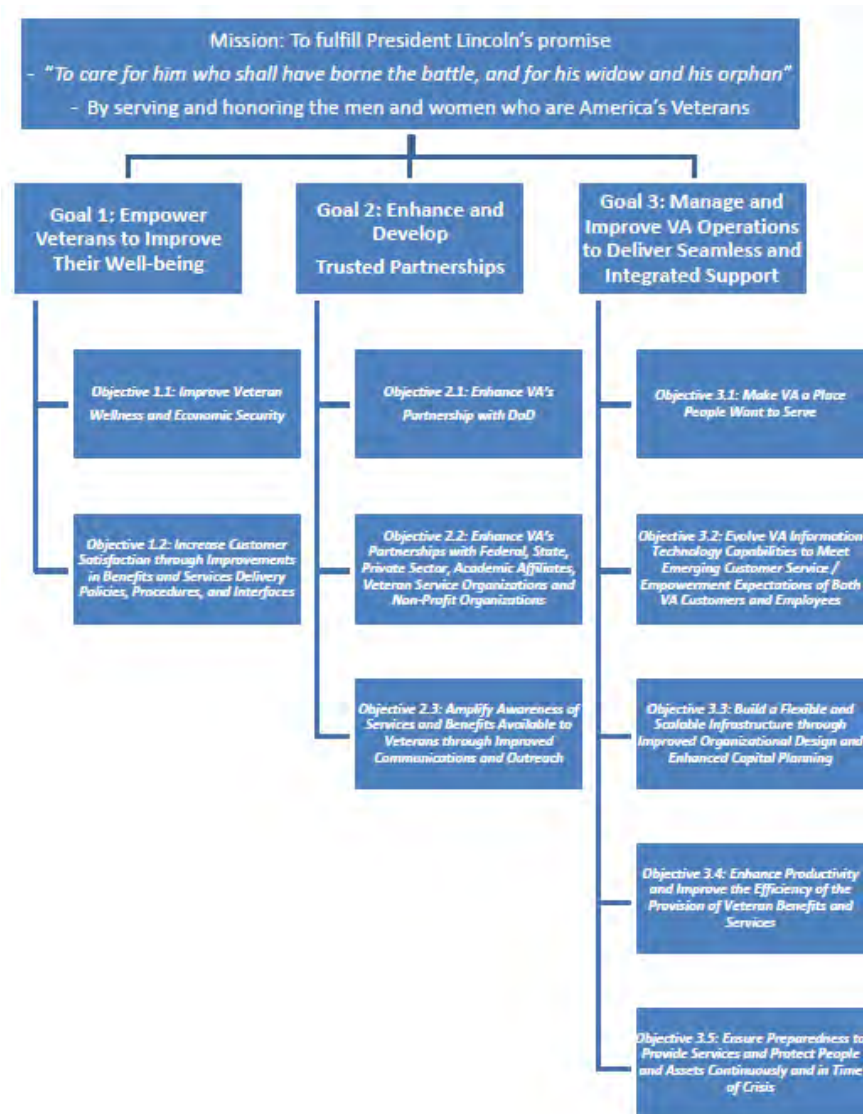
Figure 1. VA's Mission, 2014 to 2020 Strategic Goals and Objectives

Source: US Department of Veterans Affairs, *Department of Veterans Affairs FY 2014-2020 Strategic Plan* (Washington, DC: Department of Veterans Affairs, 2013).

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[10] U.S. Department of Veterans Affairs. *Department of Veterans Affairs FY 2014-2020 Strategic Plan*.

Strategic goal two, enhancing and developing trusted partnerships, contains two objectives directly relate to the Service Member population.

Objective 2.1-Enhance VA's partnership with DoD contains five performance goals:

1. Increase the percentage of active duty, National Guard and Reserve Service Members with an eBenefits log-on by the end of fiscal year 2015.

2. Increase the percentage of Service Members receiving a separation health assessment prior to separation from active duty.

3. Increase the percentage of Integrated Disability Evaluation System discharges that meet VA—DoD goal of 60 percent of cases completed within 295 days.

4. Create clinical and technical standards profile and processes to ensure seamless integration of health data between VA and DoD and private health care providers.

5. Increase the percentage of VA and DoD providers trained in the use of consistent models of evidence-based practice for Post-Traumatic Stress Disorder, depression, and other psychological health conditions.

Objective 2.3-Amplify awareness of services and benefits available to Veterans through improved communications and outreach contains four performance goals:

1. Increase the number of Veterans accessing VA services or benefits.

2. Increase the number of Veterans with whom VA currently communicates.

3. Increase the number of states with signed demographic data sharing agreements.

4. Increase Veteran satisfaction with VA services.[11]

These objectives and nested performance goals were important to this research because they directly relate to enhancing transition services between VA and DoD, increasing Service Members awareness and knowledge of VA benefits and increasing access and satisfaction of VA services. These performance goals would increase Service Members knowledge and trust of VA. What is uncertain is if the media plays a role in Service Members knowledge and trust. The next question will be if the media does play a role and shapes Service Members trust in a negative way, does this result in a decline of seeking VA benefits, and will VA's performance goals will be attainable.

Another critical factor directly affecting VA is the projected 20 percent reduction in the defense budget by 2019. Current proposals to meet the budget cuts include a drastic reduction in the DoD work force, to include Service Members. Current proposals estimate 80,000 Service Members will transition out of the military by 2017.[12] This reduction in forces from DoD will represent an increase in Veterans who will be eligible to apply for various VA benefits and services.

This research will include a qualitative study through the use of surveys of Service Members to assess their current knowledge levels of VA benefits and joint VA and DoD transition programs, current trust of VA and if the media may have effected trust and their potential use of VA benefits. The findings of this study is used to identify

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[11] Ibid.

[12] Nick Simeone, "Hagel Outlines Budget Reducing Troop Strength, Force Structure," *American Forces Press Service*, February 24, 2014, accessed October 11, 2014, http://www.defense.gov/news/newsarticle.aspx?id=121703.

recommendations for further studies will enhance the relationship between Service Members' knowledge and trust of VA and their potential use of VA benefits.

<div align="center">Research Purpose</div>

This research assesses what knowledge individual Service Members have regarding VA benefits and VA—DoD transition programs, their trust of VA and how the media affects it and how they correlate to their potential use of VA benefits in the future. The intent will be to identify recommendations that may enhance Service Members knowledge, trust and potential use of VA benefits in the future.

<div align="center">Primary Research Question</div>

How does the individual Service Member of the Armed Forces current knowledge and trust of the Department of Veteran's Affairs (VA) affect their potential use of VA benefits?

<div align="center">Secondary Research Questions</div>

1. What is the Service Members' current level of knowledge of VA programs?

2. What is Service Members' current level of knowledge of joint VA—DoD programs?

3. Does the media influence Service Members' perception of VA?

<div align="center">Hypotheses</div>

The question this research seeks to answer is whether Service Members knowledge and trust of VA affects their potential use of VA services and benefits. The research hypothesis for this study evaluates relationship between the independent variables and the dependent variable. There were two independent variables included in

this study: Service Members' knowledge and Service Members' trust. There is only one dependent variable in this study; the potential use of VA benefits.

H1: Service Members' current knowledge and trust of VA will affect their potential use of VA benefits.

$H1_0$: Service Members current knowledge and trust of VA will not affect their potential use of VA benefits.

H2: Service Members have 50 percent or greater knowledge base of VA programs.

$H2_0$: Service Members have 49 percent or less knowledge base of VA programs.

H3: Service Members have 50 percent or greater knowledge base of joint VA— DoD programs.

$H3_0$: Service Members have 49 percent or less knowledge base of joint VA—DoD programs.

H4: Service Members' perception of VA is influenced by the media.

$H4_0$: Service Members' perception of VA is not influenced by the media.

Assumptions

Department of Veterans Affairs' mission is one that serves the Veteran population, which inherently is a politically sensitive demographic. Therefore, VA has been under scrutiny and subjected to criticism throughout the history of the organization. After the recent crises, President Obama's directive to Secretary McDonald was to regain Veterans trust, and one of the Secretary's short-term objectives is to rebuild trust with Veterans and Stakeholders. Based on these actions, there is an assumption there is a breakdown of trust between VA and the nations' Veterans.

The research on this subject is limited to a baseline of information regarding

current knowledge of VA benefits by the National Survey of Veterans, Active Duty

Service Members, Demobilized National Guard and Reserve Members, Family Members,

and Surviving Spouses conducted for VA under a contract service by Westat, released on

October 18, 2010. Even though this is the sixth version on the National Survey of

Veterans, this was the first to incorporate an assessment of beneficiary awareness of VA

benefits and services and expanded to audiences beyond Veterans due to Public Law 108-

454, Section 805.[13] The data collected from the Active Duty population through surveys

focused on how individuals sought information or assistance from VA and their

awareness of certain benefits provided by VA.

A second limitation imposed is due to the use of qualitative research and survey

methodology. Limitations include the willingness of the respondents' to participate, their

integrity and honesty of their responses to the survey questions.

Delimitations

Due to the time constraints, survey distribution was limited to a random sample of

the population of Service Members who were attending U.S. Army Command and

General Staff College during academic year 2015. Therefore, the entire population

consists of officers in the grade of O-4, who is mid-career having served between 10 and

15 years.

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[13] Westat, *National Survey of Veterans, Active Duty Service Members, Demobilized National Guard and Reserve Members, Family Members, and Surviving Spouses*, Submitted to U.S. Department of Veterans Affairs (Rockville, MD: Westate, 2010).

Defining Terms

Department of Defense: An executive department of the United States whose purpose is to provide the military forces needed to deter war and to protect the security of the United States.[14]

Department of Veterans Affairs: An executive department of the United States whose purpose is to administer the laws providing benefits and other services to Veterans and the dependents and the beneficiaries of Veterans.[15]

Individual Trust: A form of social capital that enhances performance between individuals, within and among small groups, and in larger collectives.[16]

Knowledge: An individuals justified true beliefs.[17]

Media Effects: The belief that mass communication has noticeable effects on individuals, society, and culture.[18]

National Cemetery Administration: Administration within VA, whose mission is to honor Veterans and their families with final resting places in national shrines and with lasting tributes that commemorate their service and sacrifice to our nation.[19]

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[14] U.S. Department of Defense, "About the Department of Defense (DOD)," accessed May 10, 2015, http://www.defense.gov/about/.

[15] *38 USC 301*.

[16] Robert F. Hurley, *The Decision to Trust: How Leaders Create High-Trust Organizations* (San Francisco: Jossey-Bass, 2011).

[17] Richard Feldman, *Epistemology* (Upper Saddle River, NJ: Pearson Hall, 2003).

[18] Elizabeth M. Perse, *Media Effects and Society* (Mahwah, NJ: Lawrence Erlbaum Associates, Publishers, 2001).

[19] National Cemetery Administration, "About NCA," last updated April 17, 2015, accessed May 10, 2015, http://www.cem.va.gov/about/index.asp.

Organizational Trust: An individual's belief or a common belief among a group of individuals that another individual or group (a) makes good-faith efforts to behave in accordance with any commitments both explicit or implicit, (b) is honest in whatever negotiations preceded such commitments, and (c) does not take excessive advantage of another even when the opportunity is available.[20]

Service Member: An individual currently is serving in the Armed Forces to include the United States Army, Navy, Marine Corps, Air Force, and Coast Guard, including their Reserve components.[21]

Veteran: A person who served in the active military, naval, or air service and was discharged or released under conditions other than dishonorable.[22]

Veteran Health Administration: Administration within VA, whose mission is to honor Veterans by providing exceptional health care that improves their health and well-being.[23]

Veterans Benefits Administration: Administration within VA, whose mission is to honor Veterans by providing a variety of benefits to Service Members, Veterans and their families.[24]

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[20] Roderick M. Kramer and Tom R. Tyler, *Trust in Organizations* (Thousand Oaks, CA: Sage Publications, 1996).

[21] Ibid.

[22] *38 CFR Part 3.1.*

[23] Veterans Health Administration, "About VHA," last updated June 1, 2015, accessed May 10, 2015, http://www.va.gov/health/aboutVHA.asp.

[24] Veterans Benefits Administration, "About VBA," last updated December 18, 2014, accessed May 10, 2015, http://www.benefits.va.gov/BENEFITS/about.asp.

Summary

       Department of Veterans Affairs is the second largest federal government agency and has one of the noblest missions of all, "to care for him who shall have borne the battle and for his widow, and his orphan." VA has faced several crises over the last few years, which has resulted in a loss of trust among Veterans. A unique group within this Veteran population is the Service Member community. As VA leadership continues to put forth efforts to regain Veterans trust, this research will look only at the Service Member community and seek to identify if their knowledge or trust of VA, whether the media affects their perception and if these factors affect their potential use of VA benefits and services.

CHAPTER 2

REVIEW OF LITERATURE

Overview

This research assessed what knowledge Service Members have regarding VA benefits and VA—DoD transition programs, whether the service member (respondent) sees VA as a trusted organization, if the media affects the respondent's perception of VA and how this information affects the respondent's potential use of VA benefits in the future. In order to understand each element of the problem being addressed the author reviewed literature regarding development of knowledge, individual trust, organizational trust, VA crises, current VA initiatives and the role of the media. Knowledge and trust have been studied for decades and many experts have defined, developed, theories and descriptive models. Due to the limited time constraints of this research project this chapter will focus on a few theorists who have widely accepted theories on these topics.

Knowledge

The author attempted to assess individual Service Member's current level of knowledge regarding VA benefits and VA—DoD transition programs. In order to accomplish this task the author must first describe what it means to have knowledge of something. The theory of knowledge, known as Epistemology, simply states knowledge is an individuals justified true beliefs. An individual is simply not born with these justified true beliefs though, so it is also important to understand how an individual's life creates and shapes their true beliefs. People continually acquire knowledge through experience and education and is shaped by facts, information, skills, perception,

reasoning and memory. In Richard Feldman's book, *Epistemology*, he breaks down the types of knowledge into three basic categories: prepositional knowledge, acquaintance knowledge or familiarity, and ability knowledge.[25] For this study, knowledge will refer to an individual's propositional knowledge, or knowledge of facts.

<div align="center">Individual Trust</div>

Each person has their own relationship of trust between other individuals, groups, organizations and even government. In Robert F. Hurley's book, *The Decision to Trust*, he defines trust as a form of social capital that enhances performance between individuals, within and among small groups, and in larger collectives and that a lack of trust is distrust.[26] He also states, "Trust is the degree of confidence you have that another party can be relied on to fulfill commitments, be fair, be transparent, and not take advantage of your vulnerability."[27] This relationship is an important concept to understand how trust because it affects an individual's decision-making process. Figure 2 is a diagram Hurley uses to reflect how a person's degree of trust or distrust may affect decision making with another party.

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[25] Feldman, *Epistemology*.

[26] Hurley, *The Decision to Trust, How Leaders Create High-Trust Organizations*.

[27] Ibid.

Figure 2.   The Distrust-Trust Continuum

Source: Robert F. Hurley, *The Decision to Trust: How Leaders Create High-Trust Organizations* (San Francisco: Jossey-Bass, 2011).

So what factors cause an individual's shift between trust and distrust? Through Hurley's research, he created The Decision Trust Model[28] (figure 3). The Decision Trust Model identifies two categories of factors affecting an individual's degree of trust and how describes how those two categories affect decision-making. The first category is trustor factors, which assess an individual's general disposition of trust. This category weighs three elements from low to high: risk tolerance, adjustment and power. These elements are unique to an individual based on their personal preferences, experiences, culture and a person's general willingness to trust. The second category is situational factors and includes seven elements: situational security, similarities, interests, benevolent concern, capability, predictability-integrity, and communication. This second category and each element within the category can vary for different situations or other party interactions. An individual's decision to trust or distrust reflected in the Decision

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[28] Ibid.

Trust Model by balancing the varied degrees of trust among all of the elements within the trustor and situational factors. This model is a visual representation of the elements a person considers when making the decision to trust or distrust. Furthermore, individuals or organizations trying to regain trust of another individual can use this model.

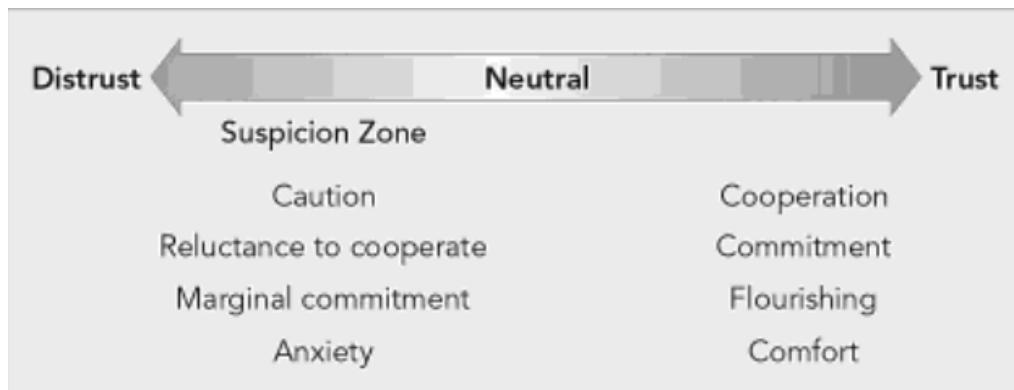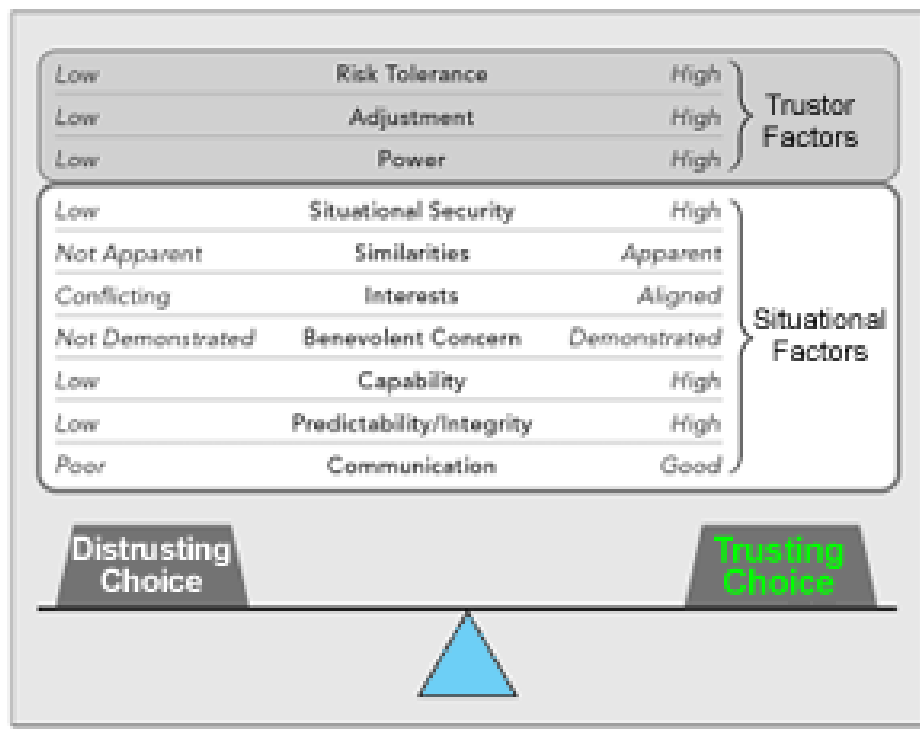
Figure 3.   The Decision Trust Model

Source: Robert F. Hurley, *The Decision to Trust: How Leaders Create High-Trust Organizations* (San Francisco: Jossey-Bass, 2011).

Organizational Trust

The concept of organizational trust has been studied and written about heavily over the last few decades and is considered a critical factor for organizational success.

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Leaders and others often evaluate organizational trust internally and externally. The internal perspective of trust studies the relationships between employees and management, while the external perspective of trust studies the relationships between the organization and its stakeholders. Since this research problem and study evaluates trust relationships between VA and their stakeholders, this chapter will focus on the external trust factors of an organization.

The book *Trust in Organizations, Frontiers of Theory and Research* compares many of the written works of theorists from the 1980s and 1990s. This comparison takes each theory and looks at the positions of whether trustworthy behavior is measurable. In summary, the authors combined popular theories in order to create a commonly accepted definition of trust. He defines trust as, "An individual's belief or a common belief among a group of individuals that another individual or group (a) makes good-faith efforts to behave in accordance with any commitments both explicit or implicit, (b) is honest in whatever negotiations preceded such commitments, and (c) does not take excessive advantage of another even when the opportunity is available."[29]

In 2008, Stephen M. R. Covey published *The Speed of Trust* along with numerous organizational leadership-training programs.[30] In his literature, he defends the position that trust is measurable and places organizational trust into categories: trust levels, trust components and trust effects. Leaders will typically use employee surveys to measure internal trust levels. Trust components are observable behaviors between individuals and

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[29] Kramer and Tyler, *Trust in Organizations*.

[30] Stephen M. R. Covey, *The Speed of Trust: The One Thing That Changes Everything* (New York, NY: Simon and Schuster, 2008).

groups. Trust effects have an economic impact on the individual. One could compare

trust effects to a dividend or tax that the consumer provides the organization as the trust

relationship increased or decreases. Covey's theory places an organization in either a low

or a high trust and equates these labels directly to their economic success.

<div align="center">Department of Veterans Affairs Crisis</div>

Department of Veterans Affairs has faced its share of criticism over the years; the

latest crisis occurred in September 2013 when an employee reported falsifying patient

waitlists at VA Medical Centers (VAMC) in order to meet agency goals. In addition, to

falsifying wait lists came reports that some Veterans placed on alternate waitlists, even

though they were in need of critical care, passed away. In April 2014, the House

Committee on Veterans' Affairs called on the VA OIG to conduct a formal investigation

into these allegations.

On May 28, 2014, VA OIG released a preliminary investigation report confirming

allegations of falsified data related to waitlists. The final report released on August 26,

2014 contained 24 recommendations of corrective action for VA to implement. The

report also announced 93 additional ongoing investigations stemming from over 400

additional allegations from VA employees, Veterans and family members. Additionally,

VA OIG began working with the U.S. Department of Justice, the U.S. Federal Bureau

Investigation and the U.S. Office of Special Counsel regarding any evidence that supports

criminal intent. In conclusion, VA OIG provided the following statement:[31]

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[31] U.S. Department of Veterans Affairs, Office of Inspector General, *Veterans Health Administration Review of Alleged Patient Deaths, Patient Wait Times, and Scheduling Practices at the Phoenix VA Health Care System*, 14-02603-267 (Washington, DC: Department of Veterans Affairs, 2014).

This report cannot capture the personal disappointment, frustration, and loss of faith of individual Veterans and their family members with a health care system that often could not respond to their mental and physical health needs in a timely manner. Immediate and substantive changes are needed. If headquarters and facility leadership are held accountable for fully implementing VA's action plans for this report's 24 recommendations, VA can begin to regain the trust of Veterans and the American public. Employee commitment and morale can be rebuilt, and most importantly, VA can move forward to provide accelerated, timely access to the high-quality health care Veterans have earned—when and where they need it.

After the preliminary VA OIG report, Secretary Eric Shinseki resigned and President Obama later appointed Robert McDonald. The new Secretary released a memorandum on August 18, 2014 in response to VA OIG's report concurring to all 24 recommendations and provided a detailed crisis action plan. In the memorandum, Secretary McDonald states:[32]

1. VA is in the midst of a crisis. As we now tackle nationwide challenges to timely Veteran access to health care while also fixing our scheduling system, our priorities are clear:

> a. to get Veterans off wait lists and into clinics;

> b. to address VA's cultural issues, which includes holding people accountable for willful misconduct or management negligence, and creating an environment of openness and transparency; and

> c. to use our resources to consistently deliver timely, high-quality health care to our nation's Veterans;

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[32] Ibid.

2. We sincerely apologize to all Veterans and we will continue to listen to

Veterans, their families, Veterans Service Organizations and our VA employees to

improve access to the care and benefits Veterans earned and deserve.

These crises scarred the agency and with the new leadership in place, the future of VA

includes agency wide reform.

<div style="text-align: center;">Department of Veterans Affairs Initiatives</div>

Because of VA OIG investigation, Secretary McDonald announced an aggressive

90 day plan on September 8, 2014 set to conclude on November 11, 2014. The Secretary

called the plan *The Road to Veterans Day 2014*.[33] This plan identified internal short-term

key actions directed by the Secretary to VA's leadership and workforce in order to

reaffirm their commitment to the agencies mission of caring for Veterans and their

families. The key actions designed to achieve three strategic goals:

1. Rebuild Trust with Veterans and other Stakeholders;

2. Improve service delivery (effectiveness and efficiency), focusing on Veteran

    outcomes;

3. Set the course for longer-term excellence and reform.

On November 6, 2014, VA released *The Road to Veterans Day Action Review,* outlining

the efforts taken over the previous 90 days to meet the key actions, strategic goals, and

announced VA's dedication to continue on the path of long-term goals and a

reorganization that would situate the agency to better focus on Veterans' outcomes.[34]

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[33] U.S. Department of Veterans Affairs, *The Road to Veterans Day 2014*.

[34] U.S. Department of Veterans Affairs, *The Road to Veterans Day, Action Review* (Washington, DC: Department of Veterans Affairs, 2014).

Another initiative Secretary McDonald announced through a press release on November 10, 2014 was MyVA, a reorganization of VA focused on enhancing both employees and Veterans experiences within the agency. The agency attempted to eliminate barriers effecting delivery of customer service to Veterans and ultimately change the culture of the agency to become Veterans' outcomes centric. The plans objectives:

> 1. Establish a new **VA-wide customer service organization** to ensure the agency provides top-level customer service to Veterans. A Chief Customer Service Officer who reports to the Secretary will lead this effort. The mission of the new office is to drive VA culture and practices to understand and respond to the expectations of our Veteran customers.

> 2. Establishing a **single regional framework** to simplify internal coordination, facilitate partnering and enhance customer service. Through this change, Veterans will be able to easily navigate VA without having to understand the inner structure.

> 3. Working with agency's partners to establish a national network of **Community Veteran Advisory Councils** to coordinate better service delivery with local, state and community partners. Expanded public-private partnerships will help VA coordinate Veteran-related issues with local, state and community partners, as well as VA employees.

> 4. Identifying opportunities for VA to realign its internal business processes into a **shared services** model in which organizations across VA leverage the same support services, to improve efficiency, reduce costs and increase productivity across VA. Currently, VA is examining options used in the private sector to enhance rapid delivery of services, and changes to business processes that are suited for shared services.[35]

MyVA is the largest reorganization in the history of VA and with these long-term objectives defined, the Secretary also established a single metric of the agency's success: the outcomes provided to Veterans.

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[35] U.S. Department of Veterans Affairs, "Veterans Affairs Secretary McDonald Updates Employees on MyVA Reorganization Plans," November 10, 2014, accessed November 17, 2014, http://www.va.gov/opa/pressrel/pressrelease.cfm?id=2657.

<u>Media Effects</u>

Mass communication is the methods of information distribution throughout the world, to include media techniques such as television, internet, newspapers, literature and advertising. In Elizabeth Perse's book, *Media Effects and Society,* she defines media effects as the belief that mass communication has noticeable effects on individuals, society, and culture.[36] The study of how mass communication and media effects shapes individuals, society and culture is continually growing as technology advances and information is distributed faster and in greater quantities than ever before. Mass media informs, educates and influences individuals in order to shape public opinion. When VA faced its crises, there was mass media used to inform the population of the events that took place, to educate the population of the investigation and remediation efforts conducted by VA and other external agencies tasked with assisting VA. In addition, several politicians and Veteran Service Organizations used influencing techniques of mass media to shape public opinion in order to gain support and persuade Congress and the President of the United States to fund and pass of Public Law 113-146, the Veterans Access, Choice and Accountability Act of 2014.[37] This law set forth the budget and requirements necessary to reforming VA. Part of the goal of this research is to answer whether this use of mass media affects Service Members perception of VA.

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[36] Perse, *Media Effects And Society.*

[37] Public Law 113-146, HR 3230.

Summary

This chapter provided an overview of some of the underlying issues necessary to comprehend the intent of this research project. By providing definitions and theories regarding knowledge, individual and organizational trust, VA crises and remedial initiatives, and media effects there is a common foundations used within this research to define, collect data and answer the primary and secondary research questions.

CHAPTER 3

RESEARCH METHODOLOGY

Overview

This chapter will discuss the research methodology designed to answer the primary and secondary research questions. The researcher designed the study to establish an understanding of Service Members' current knowledge of VA programs and joint VA/DoD programs. Provide an assessment regarding Service Members perception of VA as a trusted organization, and the media effects of this perception. Lastly, this research aims to validate whether these two factors affect potential behavior of Service Members applying for VA benefits and services.

Methodology

The author used a quantitative research methodology to collect information aimed at identifying trends in relation to the primary and secondary research questions. The author sought data that was very difficult to collect and quantify and does not produce cause and effect type of results, rather it identified trends used to describe or create an understanding of potential behaviors.

Data Collection Method

The researcher designed a survey as the data collection method for this study. This survey (see Appendix A), was designed to collect pertinent information from Service Members in four categories; (1) Demographics, (2) Knowledge, (3) Perception, and (4) Behaviors. The researcher will conduct trend analysis in each of these categories related to the research questions outlined in chapter 1.

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This survey, administered through the Command and General Staff College (CGSC) Quality Assurance Office, sample distribution included a random selection of 211 students attending the 2015 academic year. The survey was distributed to the sample through the DoD enterprise electronic mail messages and included an invitation and internet based link to the survey.

The demographic section of the survey is for identification of the sample of respondents and included five questions; age, rank, branch of service, years in service, and if the individual had any breaks in their service. It is important to identify whether the respondent had previous breaks in service as this might affect their responses in the knowledge section of the survey. The Veterans Opportunity to Work Act of 2011 mandated all Service Members attend a Transition Assistance Program prior to separation.[38] Prior to the mandate in the Veterans Opportunity to Work Act, only the U.S. Marine Corps considered the program mandatory. All other branches considered it an optional program that had been in existence since the early 1990s. The Transition Assistance Program includes a VA class designed to educate Service Members about all the various VA benefits they may be eligible for based on their service. In addition to gaining knowledge of VA benefits through the Transition Assistance Program, individuals with a break in their military service may also have knowledge of VA benefits due to firsthand experience of applying for VA benefits after their initial separation from the service.

The knowledge section of the survey contains two sections, the first listed sixteen programs offered to Service Members, Veterans and Dependents by VA and the second

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[38] H.R. 2433–VOW Act.

listed ten joint VA/DoD programs offered to Service Members to assist with transition from the military to civilian status. This section gains an understanding of the respondent's current level of knowledge. In addition, this section also asks Service Members if they know where to obtain information about each of these programs. The data derived from this section will directly answer the first two of the secondary research questions and will provide partial analysis for the primary research question.

The third section of the survey measures Service Members perceptions. This section contained eight questions, four with a Likert-style scale and three open-ended questions. The Likert-style scale provided the following statements to the respondent; the VA is a trusted organization, the VA provides quality service, I will utilize the VA in the future and the media has affected my image of the VA. Then respondents were asked for a response to the statement "My feelings towards the VA are" by a selection of strongly agree, agree, neither agree nor disagree, disagree, or strongly disagree. One of the open-ended questions is only for responses that included strongly agree or strongly disagree and asks for feedback of how this may influence the Service Members decision to apply for VA benefits in the future. The remaining open-ended questions were:

1. What are your expectations of VA?

2. Comments or recommendations regarding VA?

The third section of the survey gathered data aimed at answering the last two secondary research questions and will provide partial analysis for the primary research question.

The last section of the survey measures behaviors and included four questions, two yes or no questions and two open-ended questions. The yes or no questions were simply past and future behaviors: one asking if the Service Member respondent has ever

applied for VA benefits or services and the other asking if the Service Member respondent anticipates applying for any VA benefits or services in the future. If answered with a yes, the survey directs the Service Member respondent to an open-ended question asking the respondent to list which VA benefits they have already applied for or anticipate applying for benefits. The data collected from this section when correlated to trends of the previous sections will provide analysis for the last secondary research question and partial analysis for the primary research question.

<u>Summary</u>

This chapter provided an overview of the research methodology and data collection techniques the researcher used to conduct the study. The researcher chose to conduct qualitative research and designed a survey as the data collection tool. The survey contained the following four sections: demographics, knowledge, perception and behaviors, which will collect data for analyzing in order to provide answers for the primary and secondary research questions.

CHAPTER 4

ANALYSIS

Overview

This chapter presents survey results collected in order to answer the primary and secondary research questions for this study. The researcher designed this survey to measure knowledge of individual Service Members have regarding VA benefits and joint VA/DoD programs. The researcher also provided questions to assess whether Service Members viewed VA as a trusted organization, and if media effected their perception of VA. Lastly, if there is a relationship between Service Members knowledge, trust and their potential use of VA benefits in the future.

Survey Demographics

The first section of the survey included five demographic questions designed to gain an understanding of who the respondents were. The researcher sent the survey through email to 211 Service Members randomly selected from United States military students attending CGSC during academic year 2015. Only 25 students responded to the survey. The graphs below provide the demographic information from the survey.

Question 1-Please select your age;
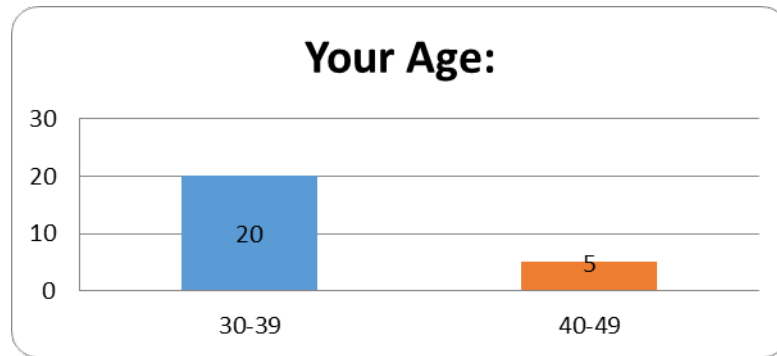
Figure 4.　Demographics-Age

Source: Created by author.

Question 2-Please select your rank;
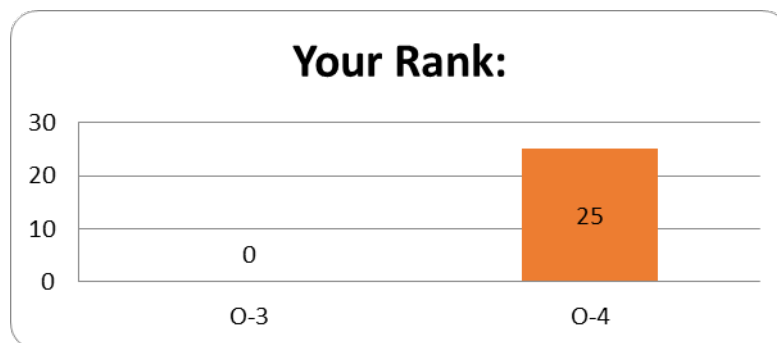
Figure 5.　Demographics-Rank

Source: Created by author.

Question 3-Please select your branch of service;

Your Branch of Service:
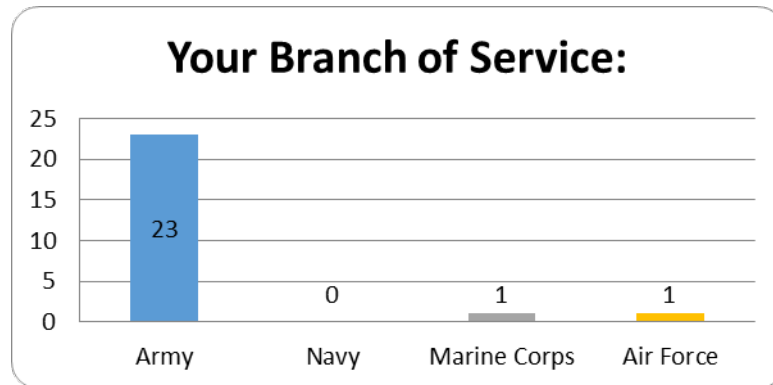
Figure 6.   Demographics-Branch of Service

Source: Created by author.

Question 4-Please select your total years of military service;

Years of military service:
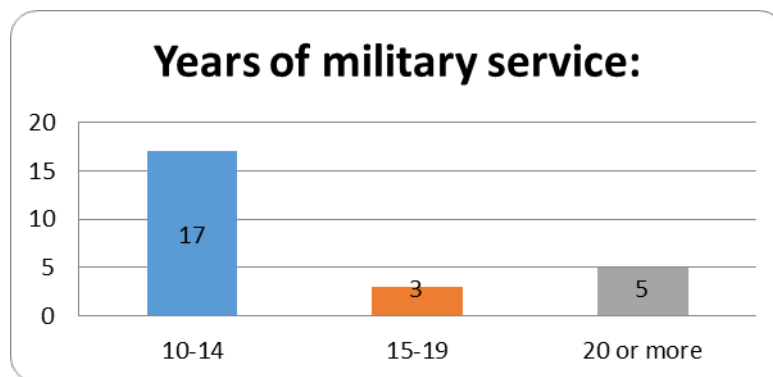
Figure 7.   Demographics-Years of Military Service

Source: Created by author.

Question 5-Have you had any breaks in military service?
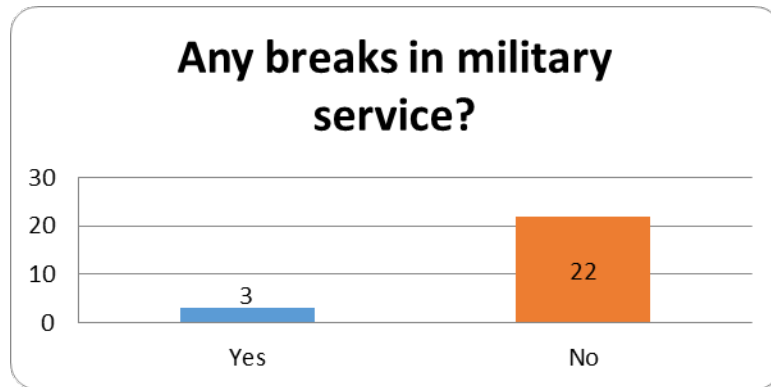
Figure 8.   Demographics-Breaks in Military Service

Source: Created by author.

Demographic Summary

The data collected in this section allows for an understanding of who the

respondents of the survey were. All respondents were serving Majors (O-4); 23

respondents currently serve in the Army, one in the Air Force and one in the Marine

Corps. Respondents ranged in the ages of 30 to 49, with 80 percent of them between 30

and 39 years old. Respondents' years of military service reveals: 68 percent have 10 to 14

years of service, 12 percent have 15 to 19 years of service, and 20 percent have 20 or

more years of service. The majority of the sample is between the ages of 30 and 39 and

has served 10 to 14 years. This identifies the majority of respondents were mid-level

career and typically not focused on retirement from the military or have concerns

regarding available transitioning from a Service Member to a Veteran yet. Another factor

that is important to understand about this sample is whether the respondents have had any

breaks in their military service as they may have attended courses designed to education

Service Members of VA and DoD transition. Out of the 25 respondents only three reported having breaks in service.

<p style="text-align: center;"><u>Knowledge Analysis</u></p>

The second section of the survey measures Service Members current knowledge of VA benefits and services and VA/DoD joint programs offered to Service Members, Veterans and their family members. For the purpose of this research, a program in which 50 percent or more of the respondents have knowledge was considered positive and deemed a well known.

The first set of questions in the knowledge section provided a list of 16 current VA benefits and services and asked the respondents to select if they had knowledge or did not have any knowledge of the program. Below in figure 9 presents the data collected concerning Service Members knowledge of each VA program in a bar graph ranking from highest to lowest. When applying the 50 percent baseline, eight of the 16 VA programs were well known.

Knowledge of VA Programs

Program	No knowledge of program.	Knowledge of program.
Life Insurance (SGLI, FSGLI, TSGLI, VGLI)	8	92
VA Home Loan Guarantee Program	8	92
Education and Training (GI Bills)	8	92
Survivor Benefits	12	88
Medical Care	24	76
Disability Compensation	32	68
Dental Care	40	60
Burial headstones, footstones and flags	44	56
VA Cemeteries	52	48
eBenefits	52	48
Veterans Crisis Line	52	48
Vet Centers	56	44
Vocational Rehabilitation and Employment	60	40
Family Caregivers Program	68	32
MyHealtheVet	72	28
Special Environmental Health Registry Evaluation Programs	72	28

Figure 9.   Knowledge-VA Programs

Source: Created by author.

The second set of questions in the knowledge section presented the same format and listed ten current VA/DoD joint programs asked the respondents to select if they had knowledge or did not have any knowledge of the program. Below in figure 10 presents the data collected in a bar graph ranking from highest to lowest the percentages of

Service Members knowledge of each VA program. When applying the 50 percent

baseline, only two of the VA/DoD joint programs were well known.
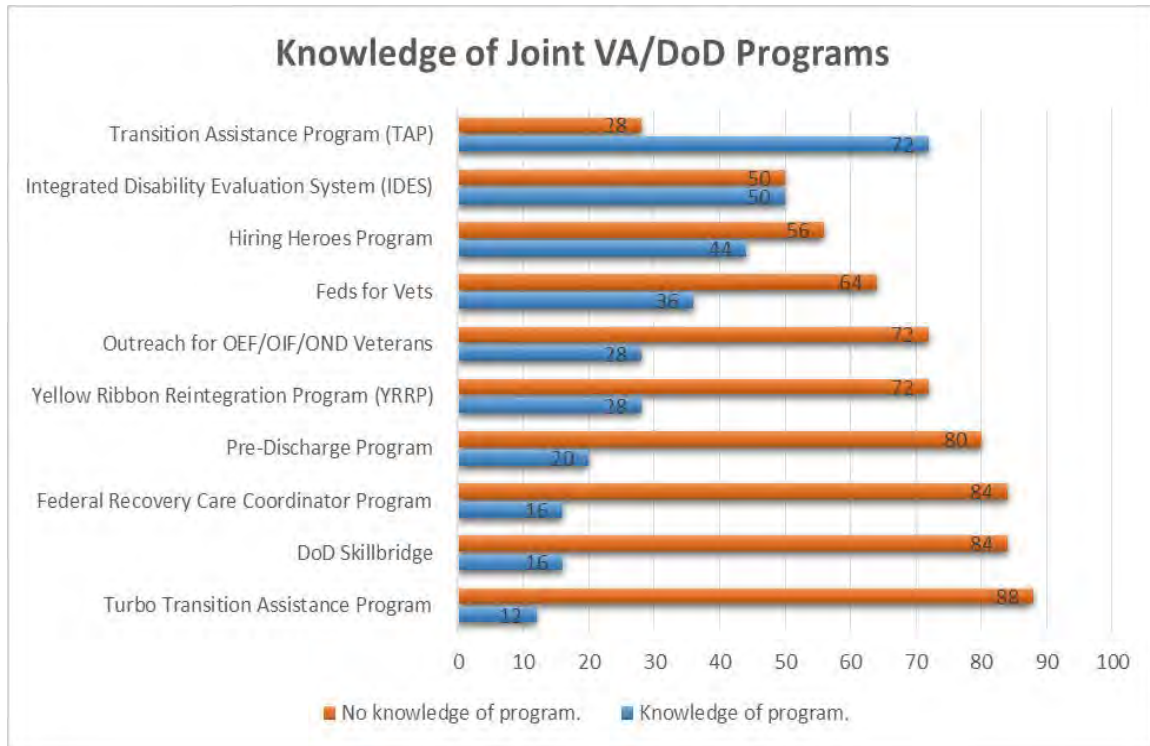
Figure 10. Knowledge-Joint VA/DoD Programs

Source: Created by author.

In order to create a baseline of what would be considered an acceptable level of

knowledge among the respondents figure 11 combines all 26 programs from both VA and

joint VA/DoD programs and ranks from highest to lowest the percentage of Service

Members knowledge of program. When applying the 50 percent baseline, figure 11

reflects 10 of the 26 VA and joint VA/DoD programs well known by Service Members.

Knowledge of VA and Joint VA/DoD Programs

Program	Knowledge of program
Life Insurance (SGLI, FSGLI, TSGLI, VGLI) *	92
VA Home Loan Guarantee Program *	92
Education and Training (GI Bills) *	92
Survivor Benefits *	88
Medical Care *	76
Transition Assistance Program (TAP)	72
Disability Compensation	68
Dental Care	60
Burial headstones, footstones and flags	56
Integrated Disability Evaluation System (IDES)	50
VA Cemeteries	48
eBenefits	48
Veterans Crisis Line	48
Hiring Heroes Program	44
Vet Centers	44
Vocational Rehabilitation and Employment	40
Feds for Vets	36
Family Caregivers Program **	32
Outreach for OEF/OIF/OND Veterans **	28
Yellow Ribbon Reintegration Program (YRRP) **	28
MyHealtheVet **	28
Special Environmental Health Registry…	28
Pre-Discharge Program **	20
Federal Recovery Care Coordinator Program **	16
DoD Skillbridge **	16
Turbo Transition Assistance Program **	12

*95 sure that more than half the population queried has knowledge of these programs.
**95 sure that less than half the population queried has knowledge of these programs.

Figure 11. Knowledge-VA and Joint VA/DoD Programs

Source: Created by author.

In addition to asking Service Members whether they had knowledge of VA and joint VA/DoD programs, there was a follow-on question asking Service Members if they knew where to find information of each program. Figure 12 presents the data concerning

this question. The bar graphs go from highest to lowest. When applying the 50 percent

baseline, 17 programs were well known.

I know where to find information on this program

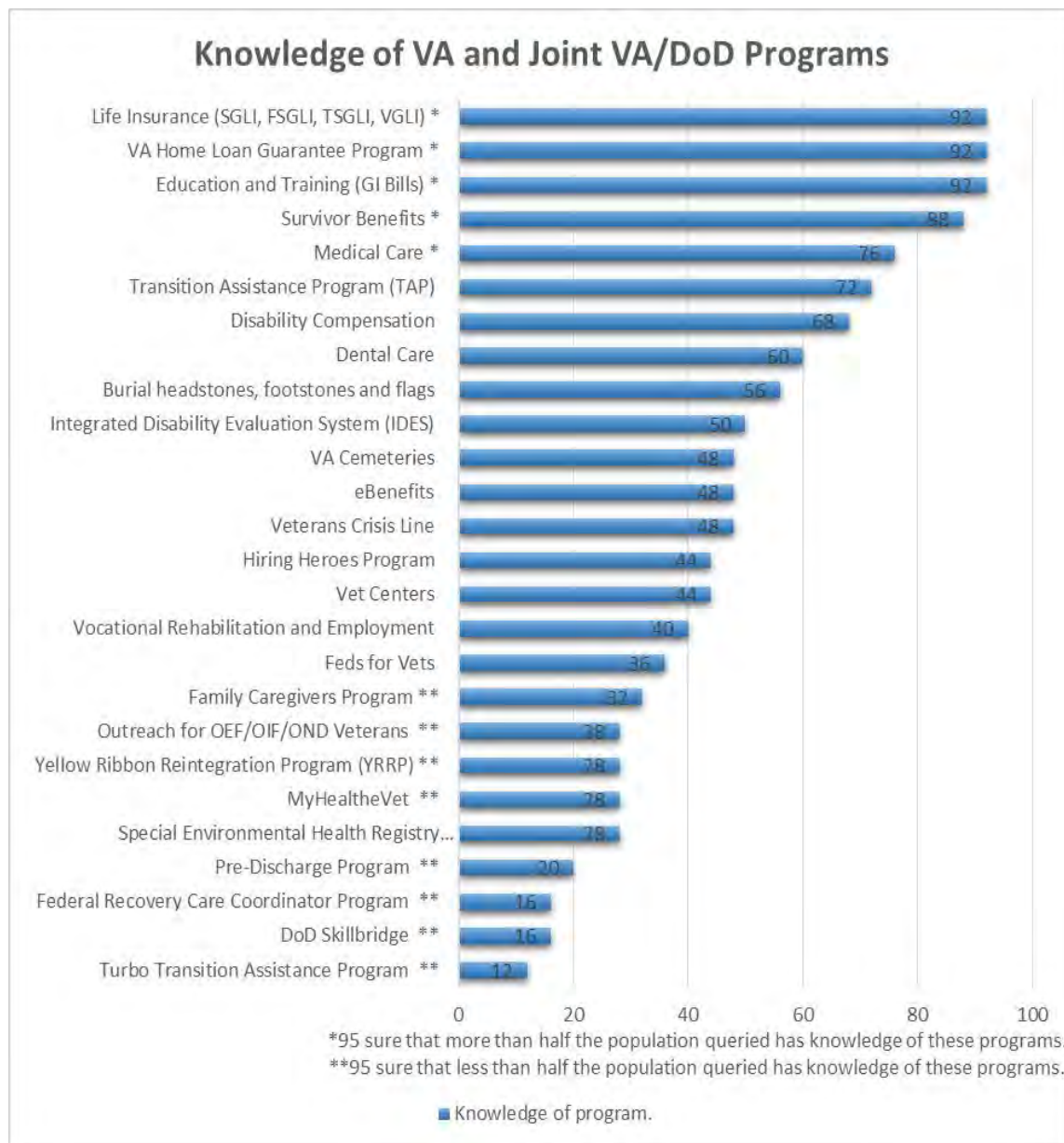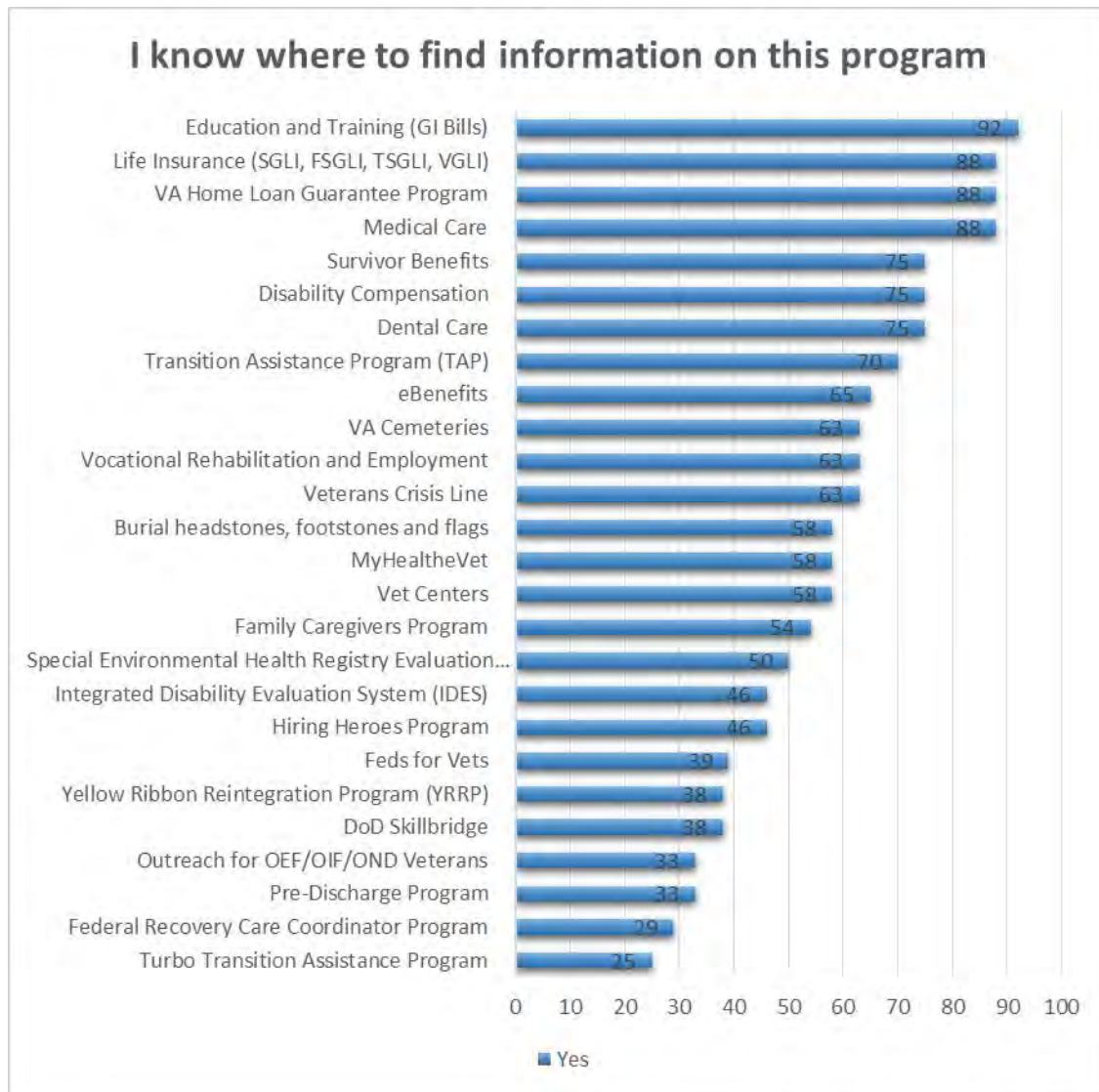| Program	Yes
Education and Training (GI Bills)	92
Life Insurance (SGLI, FSGLI, TSGLI, VGLI)	88
VA Home Loan Guarantee Program	88
Medical Care	88
Survivor Benefits	75
Disability Compensation	75
Dental Care	75
Transition Assistance Program (TAP)	70
eBenefits	65
VA Cemeteries	63
Vocational Rehabilitation and Employment	63
Veterans Crisis Line	63
Burial headstones, footstones and flags	58
MyHealtheVet	58
Vet Centers	58
Family Caregivers Program	54
Special Environmental Health Registry Evaluation...	50
Integrated Disability Evaluation System (IDES)	46
Hiring Heroes Program	46
Feds for Vets	39
Yellow Ribbon Reintegration Program (YRRP)	38
DoD Skillbridge	38
Outreach for OEF/OIF/OND Veterans	33
Pre-Discharge Program	33
Federal Recovery Care Coordinator Program	29
Turbo Transition Assistance Program	25

Figure 12. Knowledge-Finding Information on Programs

Source: Created by author.

Knowledge Summary

The data collected through the knowledge section survey provided an assessment of Service Members current knowledge of VA programs, joint VA/DoD programs, and whether they knew where to obtain information regarding the programs. For the purpose of this research, the researcher considers a program in which 50 percent or more of the respondents have knowledge of a program as positive and deemed it a well-known program among Service Members. Based on this analysis eight of 16 VA programs, or 50 percent, were well known. In comparison only two of the 10, or 20 percent, VA/DoD joint programs were well known. Finally, when asking Service Members whether they know where to obtain information on all of the programs respondents answered positively to 17 of the 26 programs, which is 65 percent.
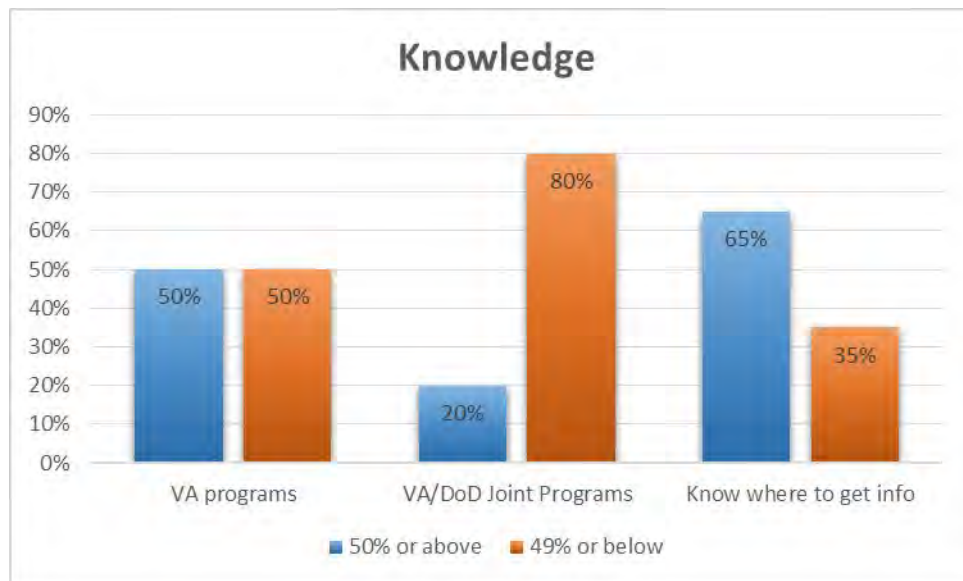

Figure 13. Knowledge Assessment

Source: Created by author.

Perception Analysis

In order to understand if Service Members perceive VA as a trusted organization the survey included four statements and asked Service Members to agree or disagree. The statements were; the VA is a trusted organization, the VA provides quality services, I will utilize the VA in the future, and the media has affected my image of the VA. Figure 14 reflects the respondent's answers and for the purpose of this research, the questions with 50 percent or greater agreement were considered affirmation of the statement.
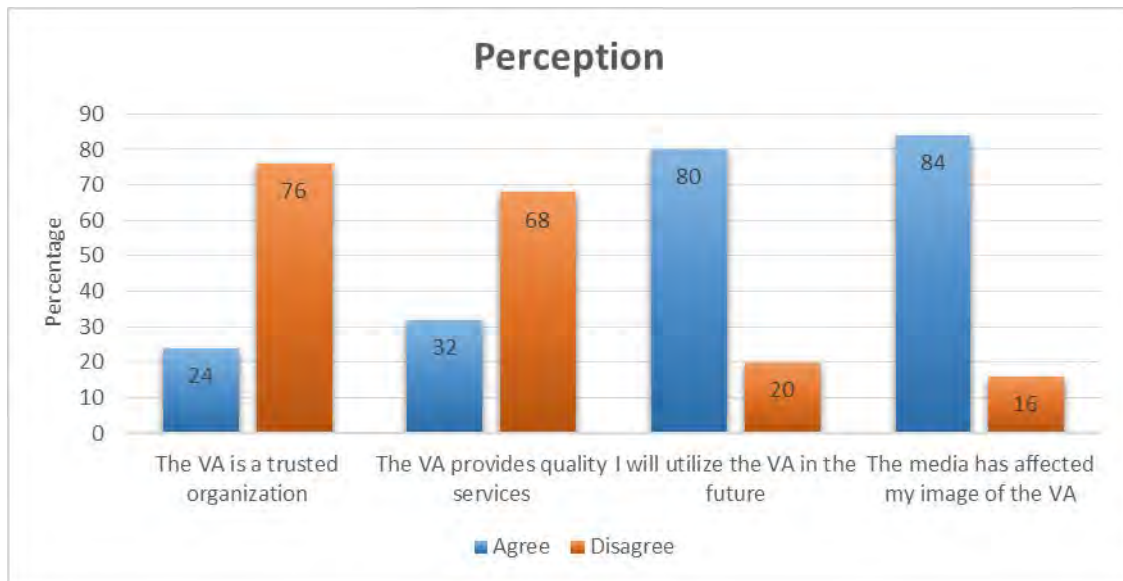

Figure 14. Perception Assessment

Source: Created by author.

Following this section, there were three optional open-ended questions allowing the Service Members to express additional details regarding their perception, expectations and recommendations regarding VA.

Question 1-If you answered strongly agree or strongly disagree on any of these statements, can you tell me about you response?

Response 1-I used VA for my home loan and post 911 GI Bill. The paperwork process for the VA home loan was straightforward (now 2015), not the first time I used it in 1998. The post 911 GI Bill was a bit rough to use via the VA webpage etc. but with the universities, they have a good handle of it.

Response 2-The media does play a part in any image problem, however, it does not account for the VA inability to properly conduct business. The image will not change unless the culture in the VA changes and performance actually improves.

Response 3-Have a service connected health issue. One night I had to go to the emergency room because of complications. The VA refused to admit me or provide services. Their reasoning: I made too much money last year. Did not matter that the injury was 100 percent service connected. That would not and could not happen on the civilian side. A company injures an employee, they are 100 percent responsible. Not true with the VA. In the end, I just paid the medical bills for the emergency room out of pocket.

Response 4-I think many of the benefits are too good not to use. Certainly, we love the loan guarantee and will probably use the educational benefits and then the disability rating in the future.

Response 5-Media has affected my image of the VA because it strengthened our opinion (my wife is a retired veteran) of the quality of care afforded to vets. My wife is on year two waiting for a scheduler to call her for a surgery. We decided to get it done

through Johns Hopkins US Family. Other instances of fully qualified doctors that seem to work at the VA as an employer of last resort. I think the VA is doing great in other areas.

Question 2-What are your expectations of the VA?

Response 1-I expect the VA to be a good source of information for varied subjects for the region in question. I also expect the VA to be responsive to veteran's needs.

Response 2-To make gaining and maintaining VA program benefits simple, timely and accurate.

Response 3-When I am ready to retire that they will take care of my service related issues and that I should not have to go through a crazy ridiculous process. I have heard horror stories especially since I am a reservist and when I came off of deployments they just processed us out with no opportunity to have medical reviews etc.

Response 4-Take care of the military member throughout the remainder of their life following the military.

Response 5-I expect them to provide veterans quality healthcare in a professional and timely manner.

Response 6-Provide assistance to me should I be unable to take care of myself later on in life in return for my military service.

Response 7-To help veterans (soldiers). . . . Not yell at them on the phone and act as though veterans (soldiers) are a "bother."

Response 8-Provide continued healthcare after required service is over; provide quality care and timely response to medical issues big and small.

Response 9-Supplement my medical care.

Response 10-To provide quality care and explanation of benefits for veterans following their military service.

Response 11-Provide trustworthy support, care, and services to our veterans. Take time and consider needs and what the veteran actually says.

Response 12-Very little. My hope is that they will provide assistance in my post-Army life with signing up for and ensuring coverage of medical programs.

Response 13-Timely, quality care for our vets. Aggressive assistance.

Response 14-Provide a wide variety of services for veterans in and out of the military.

Response 15-Support veterans for after leaving the service.

Response 16-Support veterans as they exit the service.

Response 17-Provide a wide variety of outreach, counseling, education, and medical services for veterans and their families in a timely manner with a personal touch and care for the individual served.

Response 18-Provide medical and dental support to me upon departure from active service.

Response 19-Very little. At this point I very little confidence in the VAs ability to provide better care than a non-governmental provider.

Response 20-I expect they will help when I exit the military, but also expect that the service will be slow and frustrating.

Question 3-Comments or recommendations regarding VA?

Response 1-I have dealt with the VA directly in disability compensation, GI Bill, and home loan guarantee programs. The only instance in which I felt that service was

unsatisfactory was the disability compensation transaction. My dissatisfaction was only due to the apparent lack of administrative oversight in the program. E.g. I continued to receive disability compensation after returning to active duty even after contacting the VA to stop the benefit on multiple occasions. My home loan and GI Bill benefits processes were both low on the pain threshold. Outside of my personal experiences, I have referred many enlisted Marines to VA services, and have generally received positive feedback from them.

Response 2-It should be streamlined and should not be up to me to prove all of my years of services-medical exams etc. The Service member isn't really involved in the process other than showing up and pushed out through the clinics. Records are controlled by others but then the SM is the one held accountable or harmed by not receiving benefits b/c the records have been lost or mismanaged.

Response 3-The organization seems disorganized. They should probably streamline some of their processes. It is better to conduct a few activities to the best of your ability, than to conduct many activities ineffectively.

Response 4-The home loan program is excellent and I know very little about everything else.

Response 5-Fix the backlog of patients who cannot receive care. Fire the individuals responsible for falsifying reports resulting in deaths of veterans.

Response 6-The entire organization needs a radical overhaul.

Response 7-Information regarding the VA is accessible but appears to be only a focus if (a) a service member is injured; (b) retirement is on the horizon; (c) in an organizational unit with transition Soldiers (which go to another unit anyway to be taken

care of). Why and what does a 2LT to a MAJ need to know about the VA and how should it be presented to formations?

Response 8-Continue to improve and never settle for the status quo. Veterans deserve it.

Response 9-I think the VA should establish more reasonable expectations for the services they provide. My perception is that veterans, along with the general public, have a very high expectation for what veterans are entitled to following military service. However, these expectations are not necessarily feasible based on financial means and other resources available, as well as the sheer number of veterans that require assistance. This is a likely source for the conflict and poor perceptions of the VA, which could be alleviated through more precise communication.

Response 10-Challenging job requiring patience in dealing with under manning and underfunding from Congress.

Response 11-(1) Consider more vets as providers. Work with the DoD for programs to transition Soldiers, Marines, etc. into continued service at the VA through education incentives and grants. Build better providers that have better work ethic. (2) Build the medical system around a comprehensive medical information system that DoD, VA, and civilian providers can access. The continued bolt-on approach to IT/IS and the medical field is a costly and reactive approach. The innovators and technology exists to start over and do it right for the next generation of our Armed Forces.

Response 12-Comment more towards the survey in that my results are slightly skewed due to being National Guard as opposed to traditional Active Duty. Because we

are separated from the service every time we mobilize our understanding of the VA system and how it is employed is far different than that of our Active Duty peers.

Response 13-Timeliness of services is beyond poor. The amount of paperwork and time wasted to receive even basic services is a poor reflection on the nation's supposed commitment to veterans.

Response 14-I know little of what the VA offers (provides) other than medical-dental for retirees.

Through this section of open-ended questions and Service Member responses, the researcher developed a few generalized statements. First, the media, and personal or family experiences shape the perceptions Service Members have of VA. Second, Service Members expect VA to provide assistance through and after transition in a timely and quality manner. Third, when asking Service Members for comments or recommendations they would like to share with VA the common threads in the responses were to streamline processes, increase technological capabilities and increase access.

Perception Summary

In order to understand Service Members perception of VA, this section of the survey provided four statements and asked Service Members to agree or disagree. This information provides affirmation that Service Members do not perceive VA as a trusted organization, they do not feel VA provides quality service and the media has affected their image of VA. This section also confirmed regardless of the affirmation of the first three statements all respondents reported they would utilize VA in the future.

The behavior section of the service contained two questions used to measure past and future behaviors. The first question assessed if the Service Member had ever applied for VA benefits or services in the past and the second asked Service Members if they anticipated applying for VA benefits or services in the future. Both of these questioned contained a follow on open-ended question if the respondent selected yes, they were asked to provide a list of which VA benefits and services.

Question 1-Have you ever applied for VA benefits or services?
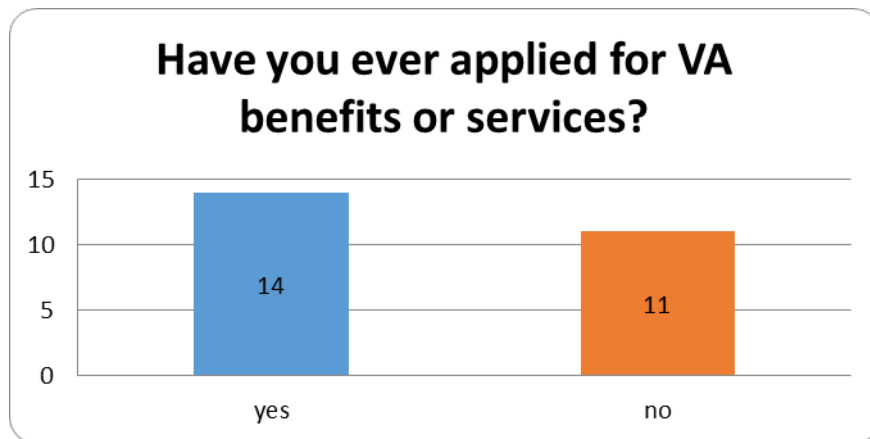
Figure 15. Behavior-Prior Use of VA Benefits

Source: Created by author.

Question 1.a-If yes, please list which benefits or services you have applied for:

Disability Compensation: One response.

Home Loan Guaranty: Eleven responses.

GI Bill: Seven responses.

Medical Benefits: Two responses.

Question 2-Do you anticipate applying for any VA benefits or services in the future?
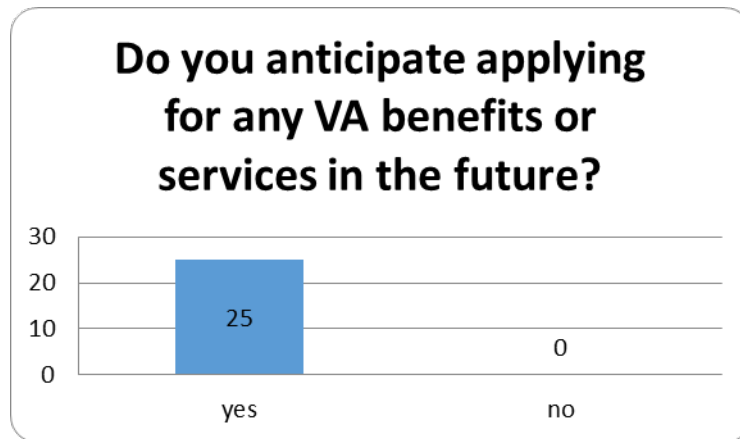
Figure 16. Behavior-Future Use of VA Benefits

Source: Created by author.

Question 2.a-If yes, please list which benefits or services you anticipate applying for in the future:

Disability Compensation: Three responses.

Home Loan Guaranty: Four responses.

GI Bill: Six responses.

Medical Benefits: Nine responses.

Transition Assistance: Two responses.

Additional responses: As many as possible, all that I can, unsure, not sure depends of how the VA improves over the next 10 to 15 years and trick question?

Behavior Summary

The purpose of these questions was to provide information based on Service Members past and future expected behaviors regarding the utilization of VA benefits and services. For past behavior, 56 percent of the respondents had applied for VA benefits in the past. For future expected behavior, 100 percent of the respondents selected they anticipate applying for VA benefits or services in the future.

CHAPTER 5

CONCLUSION AND RECOMMENDATIONS

Overview

This chapter will conclude this research by addressing each research question, and providing recommendations regarding Service Members knowledge and trust of VA. Additionally, the researcher suggests further research that would be beneficial to support these topics.

Secondary Research Question One

The first secondary research question is; what is the Service Members' current level of knowledge of VA programs. Hypothesis H2 is associated with this question:

H2: Service Members have 50 percent or greater knowledge base of VA

programs.

$H2_0$: Service Members have 49 percent or less knowledge base of VA programs. The data collected through the survey supported H2 and rejected the null hypothesis. It is important to note out of the 16 programs presented, the results were borderline as the sample surveyed responded that 50 percent of the programs were well known and 50 percent of the programs were not well known. Therefore, the answer to the second secondary research question is yes, Service Members have an adequate level of knowledge of VA benefits.

Secondary Research Question Two

The second secondary research question is; what is Service Members' current level of knowledge of joint VA/DoD programs? Associated with this question are two hypotheses:

H3: Service Members have 50 percent or greater knowledge base of joint VA/DoD programs.

$H3_0$: Service Members have 49 percent or less knowledge base of joint VA/DoD programs.

The data collected through the survey rejected H3 and supported the null hypothesis. This assessment revealed Service Members contained adequate knowledge of only 20 percent of joint VA/DoD programs and 80 percent did not have adequate knowledge of joint VA/DoD programs. Therefore, the answer to the third secondary research question is no, Service Members do not have an adequate level of knowledge of VA benefits.

Secondary Research Question Three

The third secondary research question is; does the media influence Service Members' perception of VA? Associated with this question are two hypotheses:

H4: Service Members' perception of VA is influenced by the media.

$H4_0$: Service Members' perception of VA is not influenced by the media.

The data collected through the survey supported H4 and rejected the null hypothesis. This assessment revealed 84 percent of Service Members felt the media affected their perception of VA. Therefore, the answer to the third secondary research question is yes, the media influences Service Members' perception of VA.

The secondary research questions answers were necessary in order to formulate a response to the primary research question; does the individual Service Member of the Armed Forces current knowledge and trust of VA affect their potential use of VA benefits? In addition, there were two hypotheses associated to this research question:

H1: Service Members' current knowledge and trust of VA will affect their potential use of VA benefits.

$H1_0$: Service Members current knowledge and trust of VA will not affect their potential use of VA benefits.

The data collected through the survey rejected H1 and supported the null hypothesis. Therefore, the answer to the primary research question is Service Members' knowledge and trust of VA does not affect their potential use of VA benefits. This conclusion supported the knowledge assessment where out of the 26 programs only 10 ranked above the 50 percent or greater baseline and the perception data were there was a negative affirmation to the statement VA was a trusted organization. In addition in the behavior section, 100 percent of respondents said they anticipate applying for VA benefits in the future. This evidence supports the statement Service Members' knowledge and trust of VA does not affect their potential use of VA benefits and programs.

Recommendations

This study finds Service Members' knowledge and trust of VA does not affect their expected use of VA benefits and services. However, the study did reveal a lack Service Members overall knowledge regarding VA and joint VA/DoD programs and a

lack of organizational trust with VA. Therefore, the researcher recommends to VA and DoD steps to improving Service Members knowledge and trust.

<div align="center">Knowledge Recommendation</div>

This research revealed Service Members' knowledge of VA programs deemed adequate due to the respondents having knowledge of 50 percent of the programs listed, which was the assessment baseline. Due to the VOW Act of 2013,[39] attendance to the joint VA/DoD and Department of Labor's Transition Assistance Program is now mandatory and provides an educational class of VA programs including eligibility and application processes. However, Service Members do not attend the Transition Assistance Program until within a year of separation from military service. Based on the data 56 percent of Service Members had already applied for VA benefits even though the demographics reflected the majority had only served 10 to 14 year means this sample is applying benefits prior to attending the educational session provided as part of the Transition Assistance Program. Therefore, recommendation that VA review and potentially modify the current efforts to educate Service Members of VA programs throughout their military service instead of only at the end of their service.

<div align="center">Trust Recommendation</div>

This research revealed 76 percent of Service Members did not feel VA is a trusted organization and 68 percent did not feel VA provided quality services. As discussed in chapter one, VA's 2014 to 2020 Strategic Plan second strategic goal is to enhance and develop trusted partnerships and nested within this goal is two relevant objectives:

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[39]H.R. 2433–VOW Act.

objective 2.1-enhancing VA's partnership with DoD, and objective 2.3-amplify

awareness of services and benefits available to Veterans through improved

communications and outreach. These objectives were in line with necessary actions VA

should perform. However, these objectives and the nested performance goals created only

a few months before the crisis and VA assumed they suffered a loss of trust between the

organization and Veterans. Based on the confirmation of the negative perception Service

Members have regarding VA and the quality of services VA provides, the

recommendation for VA to review the effectiveness of the current performance goals

within these two objectives and modify or add goals specifically geared at increasing

Service Members perception and trust of VA.

Further Research

This research revealed Service Members' knowledge of joint VA/DoD programs

deemed inadequate due to the respondents having knowledge of only 20 percent of the

programs listed. The survey data collected information regarding Service Members past

behaviors regarding use of VA programs, but did not address whether Service Members

had used or needed to use the joint VA/DoD programs listed. Therefore, the researcher

suggests further research to VA and DoD to identify whether providing knowledge of

joint VA/DoD programs to Service Members prior to attendance of the Transition

Assistance Programs would be beneficial should be considered.

As part of the data collection regarding Service Members knowledge of VA and

joint VA/DoD programs, the survey included a question, asking respondents if they knew

where to find information on each of the 26 programs presented. The data revealed 50

percent or more of the respondents knew where to find information on 17 of the 26

programs, in comparison to 50 percent or more of the respondents had knowledge of 10 of the 26 programs. This results in a new research question; do Service Members need to have knowledge of VA and joint VA/DoD programs or is knowing where to find information regarding the program when the information needed is sufficient? Therefore, the researcher recommends further research by VA and DoD to identify whether adequate knowledge is necessary or if the knowledge of how to access information us sufficient.

This research collected data from Service Members regarding their perception of VA as a trusted organization and ability to provide quality services. The researcher recommends further research by VA to collect additional data from Service Members regarding their perception of other federal government agencies as trusted organizations and their ability to provide quality services. Any information gained from additional studies will be useful to analyze Service Members trust or distrust levels of federal government agencies. By conducting further studies VA will be able to determine if the information found in this current study is typical or atypical concerning trust of federal agencies. In addition, conducting this type of survey analyst annually or bi-annually will allow VA to identify a gain in trust among this demographic and validate the effectiveness of efforts to regain trust.

This research revealed Service Members do not feel VA is a trusted organization and does not provide quality service, however, all Service Members reported they anticipate applying for VA benefits in the future. The researcher recommends VA conduct further survey analysis of Service Members perception of trust and quality of service related to each VA program instead of the agency as a whole. This could provide additional perspective regarding each program and identify both low and high trusted

programs, and develop and implement specific performance goals geared at increasing

the low trust programs. Therefore, conducting continual assessments in this format will

provide feedback whether the efforts taken are effective in increasing Service Members

trust in the VA program.

Summary

This research provided the conclusion that an individual Service Members of the

Armed Forces current knowledge and trust of VA does not affect their potential use of

VA benefits and services. However, it also revealed Service Members knowledge of VA

programs was borderline adequate and their knowledge of joint VA/DoD programs was

less than adequate. Another revelation this research provided was Service Members do

not feel VA is a trusted organization and does not provide quality services. Therefore,

recommendations and further research to both VA and DoD regarding methods to

increase knowledge and trust between VA and Service Members.

APPENDIX A

SURVEY

Service Members assessment of the Dept. of Veterans Affairs

This survey is designed to assess Service Members' knowledge, perceptions and behaviors regarding the Department of Veterans Affairs (VA) as an agency and the benefits and services the VA provides.

This research is to support a student's quantitative research included in their Masters of Military Arts and Science (MMAS) at the Command and General Staff College (CGSC).

Participation in this survey will take approximately 15-20 minutes. Participation is completely voluntary and all results are confidential.

For questions or concerns regarding this survey or research the Point of Contact is:
Dr. Maria Clark, Human Protections Administrator
maria.l.clark.civ@mail.mil

This survey has been approved by the CGSC quality assurance office. The survey control number is 15-04-046.

Section 1- Demographics

Question 1: Your Age:
{Choose one}
( ) 30-39
( ) 40-49
( ) 50-59

Question 2: Your Rank:
{Choose one}
( ) O-3
( ) O-4

Question 3: Your Branch of Service:
{Choose one}
( ) Army
( ) Navy
( ) Marine Corps
( ) Air Force

Question 4: Years of military service:
{Choose one}
( ) 10-14
( ) 15-19
( ) 20 or more

Question 5: Any breaks in military service?
{Choose one}
( ) Yes
( ) No

Section 2- Knowledge

Part 1: The Department of Veterans Affairs (VA) offers Service members, Veterans, and family members a variety of programs. Please select your level of knowledge and use of the following programs:

Medical Care - Knowledge and Use
{Choose one}
( ) I have no knowledge and have not used this program.
( ) I have knowledge of this program but have not used it.
( ) I have knowledge of this program and have used it.

Medical Care - I know where to find information on this program.
{Choose one}
( ) Yes
( ) No

Dental Care - Knowledge and Use
{Choose one}
( ) I have no knowledge and have not used this program.
( ) I have knowledge of this program but have not used it.
( ) I have knowledge of this program and have used it.

Dental Care - I know where to find information on this program.
{Choose one}
( ) Yes
( ) No

Vet Centers - Knowledge and Use
{Choose one}
( ) I have no knowledge and have not used this program.
( ) I have knowledge of this program but have not used it.
( ) I have knowledge of this program and have used it.

Vet Centers - I know where to find information on this program.
{Choose one}
( ) Yes
( ) No

Family Caregivers Program - Knowledge and Use
{Choose one}
( ) I have no knowledge and have not used this program.
( ) I have knowledge of this program but have not used it.
( ) I have knowledge of this program and have used it.

Family Caregivers Program - I know where to find information on this program.
{Choose one}
( ) Yes
( ) No

Veterans Crisis Line - Knowledge and Use
{Choose one}
( ) I have no knowledge and have not used this program.
( ) I have knowledge of this program but have not used it.
( ) I have knowledge of this program and have used it.

Veterans Crisis Line - I know where to find information on this program.
{Choose one}
( ) Yes
( ) No

Special Environmental Health Registry Evaluation Programs - Knowledge and Use
{Choose one}
( ) I have no knowledge and have not used this program.
( ) I have knowledge of this program but have not used it.
( ) I have knowledge of this program and have used it.

Special Environmental Health Registry Evaluation Programs - I know where to find
information on this program.
{Choose one}
( ) Yes
( ) No

MyHealth*e*Vet - Knowledge and Use
{Choose one}
( ) I have no knowledge and have not used this program.
( ) I have knowledge of this program but have not used it.
( ) I have knowledge of this program and have used it.

MyHealth*e*Vet - I know where to find information on this program.
{Choose one}
( ) Yes
( ) No

Disability Compensation - Knowledge and Use
{Choose one}
( ) I have no knowledge and have not used this program.
( ) I have knowledge of this program but have not used it.
( ) I have knowledge of this program and have used it.

Disability Compensation - I know where to find information on this program.
{Choose one}
( ) Yes
( ) No

Education and Training (GI Bills) - Knowledge and Use
{Choose one}
( ) I have no knowledge and have not used this program.
( ) I have knowledge of this program but have not used it.
( ) I have knowledge of this program and have used it.

Education and Training (GI Bills) - I know where to find information on this program.
{Choose one}
( ) Yes
( ) No

Vocational Rehabilitation and Employment - Knowledge and Use
{Choose one}
( ) I have no knowledge and have not used this program.
( ) I have knowledge of this program but have not used it.
( ) I have knowledge of this program and have used it.

Vocational Rehabilitation and Employment - I know where to find information on this program.
{Choose one}
( ) Yes
( ) No

VA Home Loan Guarantee Program - Knowledge and Use
{Choose one}
( ) I have no knowledge and have not used this program.
( ) I have knowledge of this program but have not used it.
( ) I have knowledge of this program and have used it.

VA Home Loan Guarantee Program - I know where to find information on this program.
{Choose one}
( ) Yes
( ) No

Life Insurance (SGLI, FSGLI, TSGLI, VGLI) - Knowledge and Use
{Choose one}
( ) I have no knowledge and have not used this program.
( ) I have knowledge of this program but have not used it.
( ) I have knowledge of this program and have used it.

Life Insurance (SGLI, FSGLI, TSGLI, VGLI) - I know where to find information on this program.
{Choose one}
( ) Yes
( ) No

Survivor Benefits - Knowledge and Use
{Choose one}
( ) I have no knowledge and have not used this program.
( ) I have knowledge of this program but have not used it.
( ) I have knowledge of this program and have used it.

Survivor Benefits - I know where to find information on this program.
{Choose one}
( ) Yes
( ) No

eBenefits - Knowledge and Use
{Choose one}
( ) I have no knowledge and have not used this program.
( ) I have knowledge of this program but have not used it.
( ) I have knowledge of this program and have used it.

eBenefits - I know where to find information on this program.
{Choose one}
( ) Yes
( ) No

VA Cemeteries - Knowledge and Use
{Choose one}
( ) I have no knowledge and have not used this program.
( ) I have knowledge of this program but have not used it.
( ) I have knowledge of this program and have used it.

VA Cemeteries - I know where to find information on this program.
{Choose one}
( ) Yes
( ) No

Burial headstones, footstones and flags - Knowledge and Use
{Choose one}
( ) I have no knowledge and have not used this program.
( ) I have knowledge of this program but have not used it.
( ) I have knowledge of this program and have used it.

Burial headstones, footstones and flags - I know where to find information on this program.
{Choose one}
( ) Yes
( ) No

Part 2: The Department of Veterans Affairs (VA) and Department of Defense (DoD) offer programs to assist Service Members through their transition from military service to civilian like. Please select your level of knowledge and use of the following programs:

Transition Assistance Program (TAP) - Knowledge and Use
{Choose one}
( ) I have no knowledge and have not used this program.
( ) I have knowledge of this program but have not used it.
( ) I have knowledge of this program and have used it.

Transition Assistance Program (TAP) - I know where to find information on this program.
{Choose one}
( ) Yes
( ) No

DoD Skillbridge - Knowledge and Use
{Choose one}
( ) I have no knowledge and have not used this program.
( ) I have knowledge of this program but have not used it.
( ) I have knowledge of this program and have used it.

DoD Skillbridge - I know where to find information on this program.
{Choose one}
( ) Yes
( ) No

Feds for Vets - Knowledge and Use
{Choose one}
( ) I have no knowledge and have not used this program.
( ) I have knowledge of this program but have not used it.
( ) I have knowledge of this program and have used it.

Feds for Vets - I know where to find information on this program.
{Choose one}
( ) Yes
( ) No

Hiring Heroes Program - Knowledge and Use
{Choose one}
( ) I have no knowledge and have not used this program.
( ) I have knowledge of this program but have not used it.
( ) I have knowledge of this program and have used it.

Hiring Heroes Program - I know where to find information on this program.
{Choose one}
( ) Yes
( ) No

Pre-Discharge Program - Knowledge and Use
{Choose one}
( ) I have no knowledge and have not used this program.
( ) I have knowledge of this program but have not used it.
( ) I have knowledge of this program and have used it.

Pre-Discharge Program - I know where to find information on this program.
{Choose one}
( ) Yes
( ) No

Integrated Disability Evaluation System (IDES) - Knowledge and Use
{Choose one}
( ) I have no knowledge and have not used this program.
( ) I have knowledge of this program but have not used it.
( ) I have knowledge of this program and have used it.

Integrated Disability Evaluation System (IDES) - I know where to find information on
this program.
{Choose one}
( ) Yes
( ) No

Yellow Ribbon Reintegration Program (YRRP) - Knowledge and Use
{Choose one}
( ) I have no knowledge and have not used this program.
( ) I have knowledge of this program but have not used it.
( ) I have knowledge of this program and have used it.

Yellow Ribbon Reintegration Program (YRRP) - I know where to find information on this program.
{Choose one}
( ) Yes
( ) No

Outreach for OEF/OIF/OND Veterans - Knowledge and Use
{Choose one}
( ) I have no knowledge and have not used this program.
( ) I have knowledge of this program but have not used it.
( ) I have knowledge of this program and have used it.

Outreach for OEF/OIF/OND Veterans - I know where to find information on this program.
{Choose one}
( ) Yes
( ) No

Turbo Transition Assistance Program - Knowledge and Use
{Choose one}
( ) I have no knowledge and have not used this program.
( ) I have knowledge of this program but have not used it.
( ) I have knowledge of this program and have used it.

Turbo Transition Assistance Program - I know where to find information on this program.
{Choose one}
( ) Yes
( ) No

Federal Recovery Care Coordinator Program - Knowledge and Use
{Choose one}
( ) I have no knowledge and have not used this program.
( ) I have knowledge of this program but have not used it.
( ) I have knowledge of this program and have used it.

Federal Recovery Care Coordinator Program - I know where to find information on this program.
{Choose one}
( ) Yes
( ) No

Section 3- Perception

Question 1: Please rate your level of agreement, or disagreement, with the following:

The VA is a trusted organization
{Choose one}
( ) Strongly disagree
( ) Disagree
( ) Neither agree nor disagree
( ) Agree
( ) Strongly agree

The VA provides quality services
{Choose one}
( ) Strongly disagree
( ) Disagree
( ) Neither agree nor disagree
( ) Agree
( ) Strongly agree

I will utilize the VA in the future
{Choose one}
( ) Strongly disagree
( ) Disagree
( ) Neither agree nor disagree
( ) Agree
( ) Strongly agree

The media has affected my image of the VA
{Choose one}
( ) Strongly disagree
( ) Disagree
( ) Neither agree nor disagree
( ) Agree
( ) Strongly agree

Question 1.a: If you answered strongly agree or strongly disagree on any of these statements, can you tell me about you response?
{Enter answer in paragraph form}

Question 2: What are your expectations of the VA?
{Enter answer in paragraph form}

Question 3: Comments or recommendations regarding the VA?
{Enter answer in paragraph form}

Section 4- Behavior

Question 1: Have you ever applied for VA benefits or services?
{Choose one}
( ) yes
( ) no

Question 1.a: If yes, please list which benefits or services you have applied for:
{Enter answer in paragraph form}

Question 2: Do you anticipate applying for any VA benefits or services in the future?
{Choose one}
( ) yes
( ) no

Question 2.a: If yes, please list which benefits or services you anticipate applying for in the future:
{Enter answer in paragraph form}

Thank you for your participation.

Please click the finish button to submit your responses. You will now be directed www.ebenefits.va.gov where you can log into your personal account and learn more regarding VA benefits.

APPENDIX B

SURVEY RESPONSES

Service Members assessment of the Dept. of Veterans Affairs Summary Report

Section 1 - Demographics

Question 1: Your Age:

Response Rate: 100% (N=25) Question Type: Choose one

30-39	20
40-49	5
50-59	0
Total Responses	25

Question 2: Your Rank:

Response Rate: 100% (N=25) Question Type: Choose one

O-3	0
O-4	25
Total Responses	25

Question 3: Your Branch of Service:

Response Rate: 100% (N=25) Question Type: Choose one

Army	23
Navy	0
Marine Corps	1
Air Force	1
Total Responses	25

Question 4: Years of military service:

Response Rate: 100% (N=25) Question Type: Choose one

10-14	17
15-19	3
20 or more	5
Total Responses	25

Question 5: Any breaks in military service?

Response Rate: 100% (N=25) Question Type: Choose one

Yes	3
No	22
Total Responses	25

Section 2 – Knowledge

Part 1: The Department of Veterans Affairs (VA) offers Service members, Veterans, and family members a variety of programs. Please select your level of knowledge and use of the following programs:

Question Type: Choose one

	I have no knowledge and have not used this program.	I have knowledge of this program but have not used it.	I have knowledge of this program and have used it.	Total Responses
Medical Care	6 24%	14 56%	5 20%	25
Dental Care	10	12	3	25

	40%	48%	12%	
Vet Centers	14	9	2	25
	56%	36%	8%	
Family Caregivers Program	17	8	0	25
	68%	32%	0%	
Veterans Crisis Line	13	12	0	25
	52%	48%	0%	
Special Environmental Health Registry Evaluation Programs	18	5	2	25
	72%	20%	8%	
MyHealth*e*Vet	18	5	2	25
	72%	20%	8%	
Disability Compensation	8	16	1	25
	32%	64%	4%	
Education and Training (GI Bills)	2	8	15	25
	8%	32%	60%	
Vocational Rehabilitation and Employment	15	9	1	25
	60%	36%	4%	
VA Home Loan Guarantee Program	2	11	12	25
	8%	44%	48%	
Life Insurance (SGLI, FSGLI, TSGLI, VGLI)	2	13	10	25
	8%	52%	40%	
Survivor Benefits	3	19	3	25
	12%	76%	12%	
eBenefits	13	7	5	25
	52%	28%	20%	

VA Cemeteries	13	11	1	25
	52%	44%	4%	
Burial headstones, footstones and flags	11	12	2	25
	44%	48%	8%	
Total Responses	165	171	64	400

Part 1.a: The Department of Veterans Affairs (VA) offers Service members, Veterans, and family members a variety of programs. Please select if you know where to find information on this program.

Question Type: Choose one

	Yes	No	Total Responses
Medical Care	21	3	24
	88%	13%	
Dental Care	18	6	24
	75%	25%	
Vet Centers	14	10	24
	58%	42%	
Family Caregivers Program	13	11	24
	54%	46%	
Veterans Crisis Line	15	9	24
	63%	38%	
Special Environmental Health Registry Evaluation Programs	12	12	24
	50%	50%	
MyHealtheVet	14	10	24
	58%	42%	

Disability Compensation	18	6	24
	75%	25%	
Education and Training (GI Bills)	22	2	24
	92%	8%	
Vocational Rehabilitation and Employment	15	9	24
	63%	38%	
VA Home Loan Guarantee Program	21	3	24
	88%	13%	
Life Insurance (SGLI, FSGLI, TSGLI, VGLI)	21	3	24
	88%	13%	
Survivor Benefits	18	6	24
	75%	25%	
eBenefits	15	8	23
	65%	35%	
VA Cemeteries	15	9	24
	63%	38%	
Burial headstones, footstones and flags	14	10	24
	58%	42%	
Total Responses	266	117	383

Part 2: The Department of Veterans Affairs (VA) and Department of Defense (DoD) offer programs to assist Service Members through their transition from military service to civilian like. Please select your level of knowledge and use of the following programs:

Question Type: Choose one

	I have no knowledge and have not used this program.	I have knowledge of this program but have not used it.	I have knowledge of this program and have used it.	Total Responses
Transition Assistance Program (TAP)	7 28%	14 56%	4 16%	25
DoD Skillbridge	21 84%	3 12%	1 4%	25
Feds for Vets	16 64%	8 32%	1 4%	25
Hiring Heroes Program	14 56%	10 40%	1 4%	25
Pre-Discharge Program	20 80%	4 16%	1 4%	25
Integrated Disability Evaluation System (IDES)	12 50%	12 50%	0 0%	24
Yellow Ribbon Reintegration Program (YRRP)	18 72%	5 20%	2 8%	25
Outreach for OEF/OIF/OND Veterans	18 72%	5 20%	2 8%	25
Turbo Transition Assistance	22	2	1	25

Program	88%	8%	4%	
Federal Recovery Care Coordinator Program	21	3	1	25
	84%	12%	4%	
Total Responses	169	66	14	249

Part 2.a: The Department of Veterans Affairs (VA) and Department of Defense (DoD) offer programs to assist Service Members through their transition from military service to civilian like. Please select if you know where to find information on this program.

Question Type: Choose one

	Yes	No	Total Responses
Transition Assistance Program (TAP)	16	7	23
	70%	30%	
DoD Skillbridge	9	15	24
	38%	63%	
Feds for Vets	9	14	23
	39%	61%	
Hiring Heroes Program	11	13	24
	46%	54%	
Pre-Discharge Program	8	16	24
	33%	67%	
Integrated Disability Evaluation System (IDES)	11	13	24
	46%	54%	
Yellow Ribbon Reintegration Program (YRRP)	9	15	24
	38%	63%	
Outreach for OEF/OIF/OND Veterans	8	16	24
	33%	67%	
Turbo Transition Assistance Program	6	18	24
	25%	75%	
Federal Recovery Care Coordinator Program	7	17	24
	29%	71%	
Total Responses	94	144	238

Section 3 – Perception

Question 1: Please rate your level of agreement, or disagreement, with the following:

Question Type: Choose one

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree	Total Responses
The VA is a trusted organization	1	10	8	6	0	25
	4%	40%	32%	24%	0%	
The VA provides quality services	0	8	9	7	1	25
	0%	32%	36%	28%	4%	
I will utilize the VA in the future	1	0	4	16	4	25
	4%	0%	16%	64%	16%	
The media has affected my image of the VA	1	1	2	17	4	25
	4%	4%	8%	68%	16%	
Total Responses	3	19	23	46	9	100

Question 1.a: If you answered strongly agree or strongly disagree on any of these statements, can you tell me about you response?

Response Rate: 20% (N=5) Question Type: Paragraph

I used VA for my home loan and post 911 GI Bill. The paperwork process for the VA home loan was straightforward (now 2015), not the first time I used it in 1998. The post 911 GI Bill was a bit rough to use via the VA webpage etc. but with the universities they have a good handle of it.

The media does play a part in any image problem, however, it does not account for the VA inability to properly conduct business. The image will not change unless the culture in the VA changes and performance actually improves.

I have a service connected health issue. One night I had to go to the emergency room because of complications. The VA refused to admit me or provide services. Their

reasoning: I made too much money last year. Didn't matter that the injury was 100% service connected. That would not and could not happen on the civilian side. A company injures an employee, they are 100% responsible. Not true with the VA. In the end I just paid the medical bills for the emergency room out of pocket.

I think many of the benefits are too good not to use. Certainly we love the loan guarantee and will probably use the educational benefits and then the disability rating in the future.

Media has affected my image of the VA because it strengthened our opinion (my wife is a retired veteran) of the quality of care afforded to vets. My wife is on year 2 waiting for a scheduler to call her for a surgery. We decided to get it done through Johns Hopkins US Family. Other instances of fully qualified doctors that seem to work at the VA as an employer of last resort. I think the VA is doing great in other areas.

Total Responses: 5

Question 2: What are your expectations of the VA?

Response Rate: 84% (N=21) Question Type: Paragraph

I expect the VA to be a good source of information for varied subjects for the region in question. I also expect the VA to be responsive to veteran's needs.

To make gaining and maintaining VA program benefits simple, timely and accurate.

When I'm ready to retire that they will take care of my service related issues and that I shouldn't have to go through a crazy ridiculous process. I've heard horror stories especially since I'm a reservist and when I came off of deployments they just processed us out with no opportunity to have medical reviews etc.

Take care of the military member throughout the remainder of their life following the military.

I expect them to provide veterans quality healthcare in a professional and timely manner.

N/A

Provide assistance to me should I be unable to take care of myself later on in life in return for my military service.

To help veterans/soldiers... Not yell at them on the phone and act as though veterans/soldiers are a "bother."

Provide continued healthcare after required service is over; provide quality care and timely response to medical issues big and small.

Supplement my medical care.

To provide quality care and explanation of benefits for veterans following their military service.

Provide trustworthy support, care, and services to our veterans. Take time and consider needs and what the veteran actually says.

Very little. My hope is that they will provide assistance in my post-Army life with signing up for and ensuring coverage of medical programs.

Timely, quality care for our vets. Aggressive assistance.

Provide a wide variety of services for veterans in and out of the military

Support veterans for after leaving the service.

Support veterans as they exit the service

Provide a wide variety of outreach, counseling, education, and medical services for veterans and their families in a timely manner with a personal touch and care for the individual served....

Provide medical & dental support to me upon departure from active service.

Very little. At this point I very little confidence in the VAs ability to provide better care than a non-governmental provider.

I expect they will help when I exit the military, but also expect that the service will be slow and frustrating

Total Responses: 21

Question 3: Comments or recommendations regarding the VA?

Response Rate: 64% (N=16) Question Type: Paragraph

I have dealt with the VA directly in disability compensation, GI Bill, and home loan guarantee programs. The only instance in which I felt that service was unsatisfactory was the disability compensation transaction. My dissatisfaction was only due to the apparent lack of administrative oversight in the program. E.g. I continued to receive disability compensation after returning to active duty even after contacting the VA to stop the benefit on multiple occasions. My home loan and GI Bill benefits processes were both low on the pain threshold. Outside of my personal experiences, I have referred many enlisted Marines to VA services, and have generally received positive feedback from them.

It should be streamlined and should not be up to me to prove all of my years of services/medical exams etc. The Service member isn't really involved in the process other than showing up and pushed out through the clinics. Records are controlled by others but then the SM is the one held accountable or harmed by not receiving benefits b/c the records have been lost or mismanaged.

The organization seems disorganized. They should probably streamline some of their processes. It is better to conduct a few activities to the best of your ability, than to conduct many activities ineffectively.

The home loan program is excellent and I know very little about everything else.

Fix the backlog of patients who cannot receive care. Fire the individuals responsible for falsifying reports resulting in deaths of veterans

The entire organization needs a radical overhaul.

Information regarding the VA is accessible but appears to be only a focus if a) a service member is injured; b) retirement is on the horizon; c) in an organizational unit with transition Soldiers (which go to another unit anyway to be taken care of). Why and what does a 2LT to a MAJ need to know about the VA and how should it be presented to formations?

Continue to improve and never settle for the status quo. Veterans deserve it.

I think the VA should establish more reasonable expectations for the services they provide. My perception is that veterans, along with the general public, have a very high expectation for what veterans are entitled to following military service. However, these expectations are not necessarily feasible based on financial means and other resources available, as well as the sheer number of veterans that require assistance. This is a likely source for the conflict and poor perceptions of the VA, which could be alleviated through more precise communication.

Challenging job requiring patience in dealing with under manning and underfunding from Congress.

1) Consider more vets as providers. Work with the DoD for programs to transition Soldiers, Marines, etc. into continued service at the VA through education incentives and grants. Build better providers that have better work ethic. 2) Build the medical system around a comprehensive medical information system that DoD, VA, and civilian providers can access. The continued bolt-on approach to IT/IS and the medical field is a costly and reactive approach. The innovators and technology exists to start over and do it right for the next generation of our Armed Forces.

None.

None.

Comment more towards the survey in that my results are slightly skewed due to being National Guard as opposed to traditional Active Duty. Because we are separated from the service every time we mobilize our understanding of the VA system and how it is employed is far different than that of our Active Duty peers.

Timeliness of services is beyond poor. The amount of paperwork and time wasted to receive even basic services is a poor reflection on the nation's supposed commitment to veterans ...

I know little of what the VA offers/provides other than medical/dental for retirees.

Total Responses: 16

Section 4: Behavior

Question 1: Have you ever applied for VA benefits or services?

Response Rate: 100% (N=25) Question Type: Choose one

yes	14
no	11
Total Responses	25

Question 1.a: If yes, please list which benefits or services you have applied for:

Response Rate: 56% (N=14) Question Type: Paragraph

Disability Compensation Home Loan Guarantee Post 9/11 GI Bill

Post GI Bill, VA Home Loan

VA Home loan

VA Home Loan

Home Loan

Montgomery GI Bill, VA Loan

Medical Treatment, GI Bill

Home Loan Guarantee

VA Home loan

VA Home Loan guarantee GI Bill

VA Home Loans

home loan

GI Bill, Health benefits

GI Bill

Total Responses: 14

Question 2: Do you anticipate applying for any VA benefits or services in the future?

Response Rate: 100% (N=25) Question Type: Choose one

yes	25
no	0
Total Responses	25

Question 2.a: If yes, please list which benefits or services you anticipate applying for in the future:

Response Rate: 84% (N=21) Question Type: Paragraph

Disability compensation

Same as above.

Probably Healthcare and transition assistance.

Medical and VA Disability

as many as possible

all that I can

Perhaps GI bill, and if needed I would search for medical care

Unsure

GI Bill

I would hope medical and dental at a minimum. Trick question?

Medical and VA Loan

VA loan

Home Loan Guarantee; Life insurance; educational benefits.

Transition assistance Medical (Maybe)

Post 9-11 GI Bill for me and my family

home loan GI bill

Disability and continuation of health

Post retirement medical care for self and family

medical, dental

Not sure, depends on how the VA improves over the next 10-15 years

Post 9-11 Bill

Total Responses: 21

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